Youth Empowerment Services Waiver Implementation Kit

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Open Letter from the YES Waiver Team

Youth Empowerment Services Waiver Providers,

The Youth Empowerment Services (YES) Waiver team thanks you for being a part of the YES Waiver program. What began as a pilot program at five local mental health authorities developed into a statewide implementation. Now YES Waiver is available in all 39 local mental health authorities/local behavioral health authorities (LMHAs/LBHAs). Over the years YES Waiver has evolved and transformed into a unique program that serves Texas youth and families across the entire state.

Over the years policies are updated, procedures are improved, staff come and go, and other changes take place. The one constant is the amount of passion and dedication each person brings with them to the YES Waiver team. Your commitment to providing the highest quality care for our youth and families engaged in YES is profoundly appreciated. Individuals like you allow the YES Waiver to get stronger each year.

We commend you for the work you do to serve Texas youth and families. Your commitment to making a difference in people’s lives is the heart of the YES Waiver program and an inspiration to us all. You are a valued member of the YES Waiver team. Thank you for choosing to make a difference in the lives of youth and families through YES Waiver. You are appreciated.

With gratitude,

The YES Waiver Team
**Introduction**

YES Waiver was developed out of the need to come up with a new and innovative way to keep youth with severe emotional disturbances (SED) in their homes and communities with their family and support systems instead of being sent to higher levels of care (hospitals, residential treatment centers, or juvenile justice). The youth and families who participate in YES Waiver have often faced many challenges and come to YES Waiver in hopes of finding something different.

We believe that YES Waiver should be the hope that youth and families are looking for. It is our responsibility to support youth and families in recognizing all the strengths they carry inside of themselves and acknowledging the resiliency they each have. YES Waiver is designed to assist youth and families in cultivating resiliency and provide tools to assist youth and families in achieving their own self-defined success. By working within a system of care framework, YES Waiver is committed to building an accessible, responsive, and effective array of services that is unique to each youth and family we serve.

**Please note that throughout this document the word “family” refers to the legally authorized representative (LAR) which can include biological parents, adoptive parents, extended family, and current caregivers.**
YES Kit Overview

This YES Implementation Kit provides an overview of what is needed to begin or continue building a strong foundation to support YES Waiver youth and families and give them the necessary tools to create and mend their own foundations.

The YES Kit contains nine chapters that provide an overview of what the YES Waiver program is, how it functions within the state of Texas, and how it empowers youth and families.

Chapter 1: YES Waiver Overview

Chapter 2: YES Quality Management

Chapter 3: What is Wraparound

Chapter 4: YES Waiver Services

Chapter 5: Provider Network Development

Chapter 6: On-Boarding New Staff and Providers

Chapter 7: Identifying and Engaging Youth and Families

Chapter 8: YES Implementation and Leadership Support

Chapter 9: Tools and Resources

We recommend that all new staff and providers be given a copy of this document to provide individuals with a basic level knowledge of the YES Waiver program. This document is not intended to replace any YES Waiver policies or procedures, the YES Kit is only supplemental information to all other YES Waiver resources and documents.

A list of all acronyms and references to additional tools and resources can be found at the end of this document.
Chapter 1: YES Waiver Overview

What is YES Waiver?

YES Waiver is a 1915(c) Medicaid program funded jointly through the Texas Health and Human Services Commission (HHSC) and federal Centers for Medicare & Medicaid Services (CMS) and administered by LMHAs/LBHAs. The program assists youth with serious mental, emotional, and behavioral difficulties. YES Waiver partners with youth, families, and communities to ensure that qualifying youth in Texas have access to a variety of community-based services and supports.

YES Waiver provides intensive and unique services delivered within a strengths-based team planning process called Wraparound. Wraparound builds on family and community supports and uses YES services to help build a family’s natural support network and connections with their community. YES Waiver services are family-centered, strengths-based, and effective at preventing out-of-home placement. YES Waiver promotes lifelong independence and self-defined success.

To participate in the YES Waiver program, youth must meet the following criteria:

- Be 3 through 18 years old
- Have serious mental, emotional, and behavioral difficulties
- Have a qualifying mental health diagnosis
- Be at risk of being placed outside of their home due to their mental health needs
- Meet the criteria to be in a psychiatric hospital
- Be eligible for Medicaid (parent’s income does not apply)
- Currently living in a home setting with a LAR or residing in their own residence if legally emancipated; or in a public or private residential treatment center (RTC) (excluding the state operated facility, Waco Center for Youth) or public or private hospital with a planned discharge date of 30 calendar days or less
### YES Waiver Goals

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<th>YES Waiver Goals</th>
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<td>Reduce out-of-home placements by all youth-serving agencies</td>
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<td>Reduce inpatient psychiatric treatment</td>
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<tr>
<td>Provide a more complete continuum of community-based services and supports</td>
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<tr>
<td>Ensure families have access to non-traditional support services identified in a family-centered planning process</td>
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<tr>
<td>Prevent relinquishment of parental rights for the purpose of obtaining mental health-services</td>
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<tr>
<td>Improve the clinical and functional outcomes of youth with serious mental, emotional, and behavioral difficulties</td>
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### YES Waiver Timeline

- **2010**: State submitted the YES Waiver application to CMS and YES started as a pilot program with a handful of LMHAs.
- **2015**: YES Waiver implemented statewide.
- **2016**: Youth in DFPS Conservatorship can access YES Waiver.
- **2017**: National Wraparound Implementation Center Contract.
2015: 84th Legislature directed YES Waiver to expand statewide, and the program was officially rolled out to every LMHA/LBHA across Texas.

2016: CMS formally approved the YES Waiver amendment to extend eligibility to youth in Department of Family Protective Services (DFPS) conservatorship. The amendment was effective July 10, 2016. This amendment re-defined the LAR to include managing conservator and/or medical consenter.

2017: YES Waiver contracted with the National Wraparound Implementation Center (NWIC) and Wraparound became the official care coordination model for YES Waiver.

Texas Resiliency and Recovery

The service delivery system in Texas for community-based mental health services is the Texas Resilience and Recovery (TRR) model. YES Waiver was designed to follow the TRR model and its values, which acknowledges that youth experiencing adverse mental health symptoms and serious emotional challenges have natural supports and strengths that should be built upon to foster resilience and recovery.

TRR was designed using the System of Care philosophy, which is child-centered and family-focused, and incorporates the youth’s and family’s strengths and supports, as well as their needs and challenges.

The values that serve as the foundation for the TRR model are:

- **Child-Centered, Family-Focused**: Child-centered means that youth should be engaged as equal partners in care and should have their voices heard throughout their involvement in the TRR system. The family-focused value honors the caregiver’s role as the primary decision-maker in the care of the youth. The youth’s and family’s goals for recovery are incorporated as the centerpiece that guides the recovery plan. Involving caregivers and youth helps to ensure the provision of culturally competent services.

- **Engagement**: Engagement emphasizes a respect for the youth’s and caregiver’s capabilities and their roles as part of the solution to the identified challenges. Barriers to access and participation in the appropriate level of care and recovery services are continuously addressed. Attention is placed on finding solutions to barriers to ensure that the youth and family are working together toward recovery.

Learn more about System of Care in Chapter 9
Evidence-Based Practices (EBP): EBPs are programs or practices that effectively integrate the best research evidence with clinical expertise, cultural competence, and the values of the individuals receiving the services. EBPs must be appropriate to the target population(s) and service settings to achieve desired outcomes.

Fidelity: Appropriate implementation of an EBP with high fidelity will result in the outcomes intended by the intervention. Fidelity requirements outline the way specific principles, practices, and procedures are implemented. Fidelity adherence is an element of continuous quality improvement (HHSC, 2016).

Who’s Who? YES Organizational Structure

Many different entities play a role in making YES Waiver operate successfully. Below we will review the entities involved in YES Waiver and discuss what their roles and responsibilities are.

CMS

CMS is part of the U.S. Department of Health and Human Services. CMS oversees many federal healthcare programs, including waiver programs. The Medicaid Home and Community-Based Services (HCBS) waiver authority was authorized under Section 1915(c) of the Social Security Act. This program is what makes YES Waiver possible and allows those who need care to receive services in their homes and communities. Under a waiver program, a state can waive certain Medicaid institutional program requirements, allowing the state to provide care for people who might not otherwise be eligible under Medicaid (CMS, 2018).

HHSC/YES Waiver Team

HHSC is responsible for oversight of the YES Waiver program across Texas. HHSC’s YES Waiver team is responsible for:

- Developing and implementing YES Waiver policies and procedures
- Policy and fiscal oversight of the YES Waiver program
- Managing and monitoring YES Waiver enrollment and capacity
- Approving clinical eligibility determinations and service authorizations to ensure YES Waiver requirements are met
- Recruiting, credentialing, supporting, and monitoring new provider organizations
- Contract compliance monitoring and quality improvement activities
● Ongoing training for YES Waiver provider organizations
● Technical assistance and support through monthly liaison calls with each YES provider organization
● Conducting annual quality improvement reviews and tracking and reporting on federal performance measures
● Approving adaptive aids, minor home modifications, and transitional services requests
● Receiving and tracking participant complaints and provider to provider complaints
● Participating in the fair hearing process

**LMHAs and LBHAs**

Texas HHSC contracts with 37 LMHAs and two LBHAs to deliver mental health services in all 254 counties in Texas. Each LMHA/LBHA is contractually required to deliver YES Waiver services within their designated service area. LMHAs/LBHAs recruit and accept referrals of potential YES Waiver participants by developing and maintaining community partnerships with local child-serving agencies and actively participating in child serving councils, meetings, or governance boards.

Families and youth interested in receiving YES Waiver services must call their LMHA/LBHA **YES Waiver Inquiry Line** to be added to the YES Waiver inquiry list. Only the LAR, managing conservator, or medical consenter may ask that a youth’s name be added to the inquiry list, unless the youth is at least 16 years old and legally emancipated. It is the responsibility of the LMHAs/LBHAs to have their inquiry line number posted on their website where it is easily accessible for families to find.

Families can search for their LMHA/LBHA by going to the **YES Waiver Participant website** and downloading the LMHA/LBHA YES Waiver Inquiry Line document, or by going to the HHSC “**Find Your Local Mental Health or Behavioral Health Authority**” webpage.

Additional responsibilities of LMHAs/LBHAs related to YES Waiver include:

● Offering all services within the TRR levels of care as designated providers of last resort
● Providing crisis services and facilitating access to higher levels of care when needed
● Fostering a system of care within the organization for every individual needing assistance
- Engaging in community outreach and strengthening community partnerships
- Completing the Uniform Assessment, assessing clinical eligibility, and recommending a level of care (LOC)
- Coordinating with appropriate entities to obtain Medicaid eligibility
- Ensuring freedom of choice of service providers for YES participants
- Informing YES participants of their client rights
- Providing intensive case management (ICM) using the National Wraparound model
- Developing and maintaining the Wraparound Plan and submitting a corresponding Individual Plan of Care (IPC) service request for each YES participant
- Facilitating transition planning and graduations
- Conducting utilization management, quality assurance, and programmatic/operational improvement activities
- Entering data either directly or through a batch process into the state’s Clinical Management of Behavioral Health Services (CMBHS) electronic health record (YES Assessment, Clinical Eligibility Document, Service Authorization/IPC, and service notes)
- Providing access to any requested documentation or files at the request of HHSC

Find out more about levels of care in the Utilization Management (UM) Guidelines

Comprehensive Waiver Providers

A Comprehensive Waiver Provider (CWP) is an organization that meets credentialing standards defined by HHSC and enters into a Provider Agreement to provide YES Waiver services. CWPs operate under a Waiver Provider Agreement with HHSC and must have a Medicaid Number and be enrolled with Texas Medicaid and Healthcare Partnership as a YES Provider. A YES Waiver provider could be an existing waiver provider agency or individuals/agencies specializing in providing behavioral health services to youth. All LMHAs/LBHAs are responsible for serving as a CWP provider of last resort.

The CWP must ensure delivery of all YES Waiver services in the YES service array directly (through employees) and/or indirectly by managing a network of subcontractors. CWPs are accountable for providing or arranging service delivery of all requested YES Waiver services. All LMHAs/LBHAs are considered CWPs and follow the same requirements.
It is the responsibility of CWPs to confirm that all staff/subcontractors meet YES Waiver credentialing standards and participate in training and education. The services provided are guided by Wraparound Plans developed in the Child and Family Team (CFT) meetings.

Additional responsibilities of CWPs related to YES Waiver include:

- Participate in CFT meetings
- Provide services and supports, by staff or subcontractors, in locations that are in the best interest of the YES participants
- Ensure freedom of choice of service providers
- Appropriately match the skill sets of all direct service staff members YES Waiver youth and families
- Implement services that are documented in the Wraparound plan and authorized on YES Waiver participants IPC
- Submit service notes in CMBHS for payment of services
- Monitor YES Waiver services for consistency with the participant’s Wraparound Plan and IPC and verify authorization prior to providing YES services
- Train staff and/or subcontractors on YES Waiver program and Wraparound process
- Notify the Wraparound facilitator of significant changes in the YES participant’s situation or needs

**Reminder**

CWPs and LMHAs/LBHAs need to be in constant communication and collaborate to support youth and families. Systems and processes should be implemented for how each organization is notified about:
CFT Meetings, IPC updates, progress notes, etc.
What Are Your YES Tools?

As you notice, there are a lot of different pieces to the “YES puzzle” and it is very important that you have all the correct pieces/tools to be able to have a full picture or understanding of how YES Waiver operates. Below you will learn about some of the most critical YES Waiver tools to know about.

YES Waiver Contracts

YES Waiver contracts are formal agreements between HHSC and the LMHA/LBHA and/or CWP provider. These contracts outline the contractor’s obligations related to the provision of YES Waiver services. These contracts include:

- Comprehensive Waiver Provider contract (YESPROV Statement of Work)
- Local mental/behavioral health authority Performance Contract Notebook (PCN)

These contracts provide specific detail related to the scope and quality of services provided to YES Waiver participants. Topics covered in contracts include:

- Deliverables and performance measures
- Providing YES Waiver services
- Enrolling and serving eligible participants
- Service targets
- Inquiry List management
- Transition plan development and coordination
- Implementation and maintenance of a quality management plan
- Wraparound facilitation provision
- Utilization of targeted case management/intensive case management (TCM/ICM) to coordinate plans of care

Below is a list of contractually required regular submissions with due dates and contact information for where to send submissions.
## Contractually Required Regular Submissions

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<th>SUBMITTED TO</th>
<th>DUE DATE</th>
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<tr>
<td>Inquiry List</td>
<td><strong>YES Inbox:</strong> <a href="mailto:YESWaiver@hhsc.state.tx.us">YESWaiver@hhsc.state.tx.us</a></td>
<td>Monthly, on or before the 5th business day</td>
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<td></td>
<td>MH Contracts: <a href="mailto:mhcontracts@hhsc.state.tx.us">mhcontracts@hhsc.state.tx.us</a></td>
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<tr>
<td>Provider Network Development Report</td>
<td><strong>YES Inbox:</strong> <a href="mailto:YESWaiver@hhsc.state.tx.us">YESWaiver@hhsc.state.tx.us</a></td>
<td>Quarterly, on or before the 15th business day</td>
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<td>MH Contracts: <a href="mailto:mhcontracts@hhsc.state.tx.us">mhcontracts@hhsc.state.tx.us</a></td>
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<td>Critical Incident Reports</td>
<td><strong>YES Inbox:</strong> <a href="mailto:YESWaiver@hhsc.state.tx.us">YESWaiver@hhsc.state.tx.us</a></td>
<td>Within 72 hours or three business days</td>
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In addition to the required regular submissions listed above, YES Waiver providers are required to submit the following information to HHSC according to the requirements outlined in contract:

- Notification of an inquiry list
- Request to HHSC for approval of a plan to operate a blended caseload
- Request to HHSC for approval to exceed the 1:10 wraparound provider organizational caseload ratios
- Request to add additional capacity slots

### Reminder

Providers must submit any documents containing protected health information via secure email. The email must never include any identifying information in the subject line of the message.
YES Waiver Policy Manual

All staff who work with YES Waiver should have a copy of the most up-to-date version of the YES Waiver Policy Manual

The YES Waiver Policy Manual provides policies, requirements, expectations, and information about the YES Waiver program. Topics include Participant Eligibility, Waiver Participation, Provider Responsibilities, LMHA/LBHA Responsibilities, Wraparound Provider Responsibilities, Comprehensive Waiver Provider Responsibilities, Services, and Quality Management. Whenever you have a question about YES Waiver, you should always begin by searching the YES Waiver Policy Manual. The YES Waiver team recommends keeping the most up-to-date digital copy on your computer. All staff who work with YES Waiver should be familiar with the YES Policy Manual and know where to locate it and how to use it. The Policy Manual can be downloaded from the YES Waiver Provider Website.

YES User Guide

The YES Waiver User Guide is a comprehensive step-by-step “how to” guide on YES Waiver program implementation. The User Guide covers everything you need to know about Program Operations, Clinical Service Overview, Billing, and how to use CMBHS. All staff who work with YES Waiver should be familiar with the YES User Guide and know where to locate it and how to use it. The YES User Guide can be downloaded from the YES Waiver Provider Website.

YES Implementation Kit

This YES Implementation Kit provides an overview of the YES Waiver program. This resource can be beneficial to providers and subcontractors. The YES Implementation Kit can be downloaded from the YES Waiver Provider Website.
YES Waiver Websites:

HHSC has two public-facing sites, the [YES Provider Website](#) and the [YES Participant Website](#).

The [YES Waiver Provider Website](#) has the following information and resources available:

- Summary of YES Waiver program and services
- Information on how to become a CWP or individual YES service provider
- Training links to the Centralized Training Infrastructure (CTI) (Discussed in more detail in [Chapter 6](#))

**TIP!**
CTI is a training platform that supports the delivery of behavioral health services for youth and adults in Texas

- Handbooks (YES Policy Manual, User Guide and YES Kit)
- Forms
  - Enrollment Packet
  - Denial or Withdrawal
  - Reserved Capacity Screening
- YES Waiver Renewal Application
- Statutes/Rules
- YES Waiver frequently asked questions (FAQs)
- YES Waiver Resources:
  - Medicaid
  - DFPS
  - YES Services
  - Provider Network Development Report
  - Tools for Wraparound
  - Safety
  - Adaptive Aids and Support
The YES Waiver Participant Website offers the following information and resources:

- What is YES Waiver?
- Program Goals
- YES Services
- Benefits of YES Waiver Services
- Who is Eligible?
- Length of Program
- How to Receive Services

**Utilization Management Guidelines:**

The goals of the Utilization Management (UM) Guidelines are to increase understanding of TRR framework, guide the selection of levels of care and services, and serve as a reference tool for service providers. The Texas Resilience and Recovery Utilization Management (UM) Guidelines – Child and Adolescent Services should be distributed in its entirety to all clinical staff who serve youth and families.

Providing the entire manual as a readily available resource will allow clinical staff to better understand the TRR continuum of care, the services that are available for youth with more intense needs, and which lower level services will be available as youth improve in treatment. The Adult and Child and Adolescent UM Guidelines can be found on the HHSC webpage (TRR UM Guidelines, 2017).

**YES Waiver State Program Liaisons:**

The YES Waiver team assigns each LMHA/LBHA a state liaison to provide support and technical assistance as needed. YES managers and other YES team members from each center are responsible for participating in monthly calls with their YES program liaison.

**Prepare to Discuss the Following Items in your Monthly Calls:**

- Success stories
- Active and unduplicated client count (run report in CMBHS – Refer to YES User Guide)
- Inquiry List
  - Are youth waiting for an intake assessment?
- Known barriers or issues?
- Anything impacting capacity?
  - Cases awaiting Medicaid
  - Potential clients in RTCs or institutions
  - New marketing efforts that might increase enrollment
  - Natural or human-made disasters, or public health emergencies
- Wraparound Facilitator caseloads/turnover
  - Mixed caseloads
  - Wraparound facilitator caseload ratios
- NWIC/Texas Center and Wraparound training support
  - Currently engaged in coaching?
  - Ongoing needs?
- Barriers to YES Waiver services/providers
  - Recruiting efforts?
  - Provider support efforts?
  - New providers recently?
- CMBHS help tickets/issues/using reports
  - DFPS/Medicaid communications
- Updates to YES staff contact list

**YES Trainings:**

HHSC’s YES Waiver team offers bi-monthly webinars and quarterly best practice meetings.

**YES Waiver Conference Calls:** Every other month, the YES team hosts the YES conference call/webinar to discuss different topics that may potentially impact all YES providers, share updates, and cover any other pertinent information regarding the YES Waiver program. YES program managers are expected to attend the YES conference calls (additional YES staff are also welcome to join the calls).

**YES Waiver Best Practices:** Each quarter, the YES team facilitates the YES Best Practices Meetings. A variety of topics are discussed during these meetings, such as:

- Best practices within the mental health field
● YES Waiver policy changes
● Trainings based on provider feedback and provider data
● Guest speakers
● Facilitated discussions

Do you have a question about YES Waiver? Before reaching out to your supervisor or YES Waiver state liaison make sure you have checked all the following resources:

☑ YES Waiver Policy Manual
☑ YES Waiver User Guide
☑ YES Waiver Websites
☑ Texas Administrative Code
☑ UM Guidelines
Chapter 2: YES Quality Management

YES Waiver Quality Management (QM) activities are performed annually by the YES Waiver team. HHSC expects YES Waiver providers to continually monitor and improve the quality and effectiveness of services.

QM activities are designed to support our mission and vision that:

- Participants have access to a full array of community-based services and supports; and
- Services are family-centered, coordinated, and effective at preventing out-of-home placement and promoting lifelong independence and self-defined success.

HHSC conducts a range of quality improvement initiatives on an ongoing basis to ensure quality of clinical care and effectiveness of the program. HHSC uses data from HHSC’s information systems, including Mental and Behavioral Health Outpatient Data Warehouse (MBOW) and CMBHS, to track performance improvement activities and assessment of unmet needs of individuals, service delivery, and effectiveness of technical assistance and training. Examples of reports/data that HHSC accesses through MBOW and CMBHS include:

- Monthly enrollment reports
- Service utilization trends
- Access to services
- Length of stay
- Crisis/hospitalization rates
- Client demographics
- Services received through TRR

HHSC conducts an annual quality management review of all provider entities that include:

- Participant file reviews;
- Case coordination;
- Provider services including claims audit;
● Provider credentialing and training requirements;
● Notification of rights; and
● Critical incident reports.

HHSC reserves the right to conduct onsite or desk reviews with or without prior notice. HHSC may engage in any activities necessary to assure the health, safety, and welfare of YES participants.

**Participant Rights**

All YES participants have the right to express concerns and grievances with the local client rights officer at the LMHA/LBHA. Providers must ensure all YES Waiver participants receive the HHSC [Handbook of Consumer Rights, Mental Health Services](#) when they begin YES Waiver.

If a YES participant would like to file a complaint, they will first contact the management of the organization providing the service. If a resolution cannot be determined and the complaint needs to be escalated, then the participant and LAR should contact their LMHA/LBHA’s Clients’ Rights Department. The LMHA submits any complaint that cannot be resolved at the local level to the HHSC Office of the Ombudsman by filing a formal complaint.

**HHSC Office of the Ombudsman**

Attn: Behavioral Health Ombudsman  
P.O. Box 13247, Mail Code: H700 Austin, TX 78711-3247  
1-800-252-8154

For more information regarding client complaints, including online submissions, please visit: [HHS Ombudsman Behavioral Health Help](#).

Complaints involving allegations of abuse, neglect, or exploitation are referred immediately to DFPS, the department with statutory responsibility for investigation of such allegations.
Chapter 3: Wraparound

Wraparound is the evidence-based practice used to coordinate YES Waiver services. HHSC contracts with the Texas Center to provide consultation, training, and coaching for those implementing Wraparound. Texas Center uses NWIC as the purveyor for training and coaching. NWIC supports states, communities, and organizations to implement Wraparound as part of broader health reform strategies.

The Texas Center provides quality improvement, policy, funding, research and evaluation, and workforce development expertise to support Wraparound across Texas.

What is Wraparound?

Wraparound is an evidence-based practice model for youth and families with severe emotional or behavioral needs. Based in an ecological model, Wraparound draws upon the strengths and resources of a committed group of family, friends, professionals, and community members. Wraparound mobilizes resources and talents from a variety of sources resulting in the creation of a Wraparound Plan that is the best fit between the family vision and story, team mission, strengths, needs, and strategies.

During the Wraparound process, each family is assigned a Wraparound facilitator who works closely with the family and the CFT members. A CFT works together with the family to develop an individualized Wraparound Plan, utilizing the strengths of the community, team, youth and family. The Wraparound Plan includes both formal supports, such as paid professionals (social workers, probation officers, teachers, etc.), as well as support and assistance provided by informal supports, such as friends, kin, and other people drawn from the family’s social networks and community. The team meets monthly to implement the Wraparound Plan, monitor its effectiveness, and work collaboratively to meet the family’s unique goals.
The Ten Wraparound Principles are discussed in more detail in *Chapter Seven*. Providing comprehensive care throughout the Wraparound process requires a high degree of collaboration and coordination among the child- and family-serving agencies and organizations in a community. To achieve high-quality Wraparound, practices should always be grounded in the fundamental need to achieve the Wraparound Principles for families and their teams.

**Identifying and Hiring Appropriate Wraparound Staff**

Wraparound implementation focuses on systems-level structures, policies, and supports to ensure quality practices. It also requires careful planning and support around workforce development at both the Wraparound Facilitator and Wraparound Supervisor level.

**Wraparound Facilitators**

Identifying or hiring staff who are well-suited to the Wraparound process is an essential component toward successful Wraparound implementation.

**Qualities and skills to look for when hiring Wraparound Facilitators:**

- Passionate about working with youth and families
- Open-minded and creative
- Receptive to the values that form the Wraparound philosophy
- Good insight and judgment
- Well-organized
- Engaging and enthusiastic personality
- Comfortable speaking in front of a group of people
- Knows when to be flexible and when to take control
- Strong writing skills
Wraparound Supervisors

Wraparound supervisors need to provide proactive, behavioral, field- and office-based coaching and supervision. Coaching and supervision of staff is an integral part of maintaining fidelity to the Wraparound practice model. This is the process by which staff are given clear direction on the steps in the Wraparound process and guidance on developing necessary skills to be effective in these activities.

Qualities to look for when hiring Wraparound Supervisors:

- Able to work across departments with peers and other stakeholders
- Able to help all involved in Wraparound at various levels to feel a sense of ownership and participation in Wraparound
- Follow contract required caseload requirements:
  - 1:10 - Wrap Facilitator: Families
  - 1:5 – Wrap Team Lead: Families
  - 1:7 - Wrap Supervisor: Wrap Facilitators
- Ability to work cooperatively with administration to ensure Wraparound is well-placed in the organization
- Can develop effective alliances with public systems (e.g., child welfare, juvenile justice systems, mental health, school systems)
- Provide a variety of creative methods to give feedback to staff (Bruns & Walker, 2008-2015)
Wraparound Training Requirements

To successfully implement Wraparound, Wraparound facilitators and supervisors must engage in different levels of the NWIC model Wraparound training. During trainings, participants participate in role plays, practice facilitation skills, and process performance feedback.

To bill for the provision of ICM, direct service providers/Wraparound facilitators must:

- Complete Introduction to Wraparound prior to the provision of services, and to continue billing for ICM
- Complete the remaining two courses of the series, Engagement in the Wraparound Process and Intermediate Wraparound Practice, within one year

Wraparound Supervisors are also expected to complete the above three trainings, in addition to the training listed below:

- Advancing Wraparound Practice—Supervision and Managing to Quality

Introduction to Wraparound (3 days)

Introduction to Wraparound is the first training of the series for frontline Wraparound Facilitators and Supervisors. Through attendance at this training, participants will be able to:

- Gain an understanding of the critical components of the Wraparound process to provide high fidelity Wraparound practice
- Practice steps of the Wraparound planning process that include: eliciting the family story from multiple perspectives, reframing the family story from a strengths perspective, identifying functional strengths, developing vision statements, team missions, identifying needs, establishing outcomes, brainstorming strategies, and creating a Wraparound Plan and Crisis and Safety Plan that represents the work of the team
- Learn basic facilitation skills for running a CFT meeting

Engagement in Wraparound (1 day)

Engagement is the second training in the series for frontline Wraparound facilitators and Supervisors. Through attendance at this training, participants will be able to:

- Identify barriers to engagement
- Develop skills around engaging team members and the family
- Apply research-based strategies of engagement for increased positive outcomes for youth and families

**Intermediate Wraparound Practice- Improving Wraparound Practice (2 days)**

Intermediate Wraparound Practice is the third training in the series for frontline Wraparound facilitators, supervisors, and directors to enhance their skills and move toward higher quality practice. Common implementation challenges are addressed in this training; however, topics can be adjusted based on individual or organizational need. Through attendance at this training, participants will be able to:

- Practice and use tools in telling and reframing the family story
- Pull out specific and individualized functional strengths for use in the planning process
- Identify underlying needs of the youth and caregiver
- Practice developing outcome statements and strategies that tie back to the reason for referral and address underlying needs moving the family closer to attaining their vision

**Advanced Supervision in Wraparound (2 days)**

This training is for supervisors/managers in Wraparound. Through attendance at this training, participants will be able to:

- Identify the essential elements of quality Wraparound implementation
- Develop an increased understanding of the role of the supervisor in quality Wraparound implementation
- Learn how to manage quality throughout the phases of Wraparound implementation
- Learn how to utilize supportive tools to develop quality Wraparound practitioners, individualized and strength-based service plans, and team processes
- Learn how to transfer knowledge and skills to the workforce

These trainings are conducted by certified national coaches and trainers. The trainings include lecture presentations, demonstrations, and skill-based practice sessions with each incrementally building upon the earlier training. *Individuals who have not implemented Wraparound and received training more than six months previously are encouraged to participate in the Wraparound series again.*
Chapter 4: YES Waiver Services

YES Waiver Service Descriptions

YES Waiver is unique because of the variety of services it provides to families both in their homes and out in the community. YES Waiver offers alternative and creative services that youth and families might not traditionally receive. The types, locations, and availability of services may vary by each service location.

Community Living Supports

Community living supports (CLS) provide curriculum-based training and use evidence-based practices to help participants and their families increase self-sufficiency, independence, community inclusion, and participation by providing services within the participant’s home or community. CLS sessions may focus on activities that offer tools and support for daily living, socialization, and general life skills as determined by the CFT. Additionally, CLS may promote communication, relationship building skills, and engagement in community activities, often reinforcing skills or lesson taught in school, therapy, or other settings.

Curriculum-based skills training can include:

- Independent living skills
- Anger management
- Socialization
- Relationship-building skills
- Positive communication
Employment Services

Employment Assistance:
Employment assistance helps YES participants find a job. The employment assistant provider will work with the participant to establish their interests and passions to assist them in finding a position in their community that meets their personal and professional career goals. Employment assistants will assist participants in creating resumes, preparing participant for an interview, teaching general work readiness skills, and assisting the participant in locating prospective employers offering employment compatible with the participant’s identified preferences and needs.

Supported Employment:
Supported employment services assist YES participants in choosing, getting, and keeping employment. This service is provided to achieve and maintain competitive employment to an individual who requires intensive, ongoing support to be self-employed, work from home, or perform in a work setting at which individuals without disabilities are employed. Supported employment includes employment adaptations, supervision, and training related to an individual’s assessed needs.

Family Supports
Family supports includes peer mentoring and support to the primary caregivers of YES youth. Family supports engage the family in the treatment process and model’s self-advocacy skills. Family supports offer expertise through their own lived experiences and can provide families with referrals and non-clinical skills training. A family support will maintain engagement and assists in the identification of natural/non-traditional and community support systems.

Paraprofessionals
Paraprofessionals are skilled behavioral aides that support the participant to meet specific goals and serve as a mentor of independent living skills. Paraprofessional services can include:
Mentoring and Coaching

Skilled mentoring is provided by an individual with additional training/experience in working with children/adolescents with mental health challenges. For example, a teenager with severe behavior challenges may require mentoring from a paraprofessional with behavioral management expertise.

Paraprofessional Aide

Aide assists the participant in preventing and managing behaviors stemming from emotional and behavioral challenges that create barriers to inclusion in integrated community activities such as after-school care or day care.

Job Placement

This service helps the participant develop a resume and complete applications to find employment.

Respite Services

YES Waiver provides in-home and out-of-home respite services. Respite services are provided on a short-term basis to address the need for relief or absence of caretakers. Respite services may be provided in:

- Participant's home or place of residence
- Private residence of a respite care provider (if that provider is a relative of the participant, other than the participant’s spouse or LAR)
- Foster home
- Day or overnight camps
- Child care centers or homes
Supportive Family-Based Alternatives

With supportive family-based alternatives, the youth temporarily resides within the home of a professional support family. The support family provides therapeutic support and models behaviors for the youth and the youths family. The goal is to help the youth return to their family in the community. A DFPS Child-Placing Agency will recruit, train and certify the support family and coordinate with the participant's family. Supportive family-based alternative services can include:

- Guidance/assistance with the daily life activities (e.g., bathing, money management)
- Securing/providing transportation
- Reinforcement of counseling, therapy, and related activities
- Help with medications
- Supervision of participant for safety and security
- Facilitating inclusion in community activities and social interactions
- Assistance in accessing community and school resources

Non-Medical Transportation

Non-medical transportation is transportation that assists participants to gain access to YES Waiver services and other community services, activities, and resources, as specified in the Wraparound plan.

Adaptive Aids and Supports

Adaptive aids and supports (AA&S) are one-time or occasional goods and/or services that are medically necessary to assist the participant in remaining in their home and/or community and avoid an out-of-home placement. AA&S are provided in combination with other YES Waiver services to decrease or eliminate barriers to services and increase the participant’s access to their community.
Minor Home Modifications

Minor home modifications include home accessibility or physical safety adaptations to the participant’s residence that are medically necessary to ensure the health, welfare, and safety of the participant. Minor home modifications include:

- Alarm systems;
- Alert systems; and
- Other safety devices.

Transitional Services

Transitional services are a one-time, non-recurring allowable expense. Transitional funding may be provided when a participant transitions from an institution, provider-operated setting, or family home to their own private community residence. Transitional services can assist youth transitioning to self-sufficiency and independence by providing funding for the following expenses:

- Utility and security deposits for the home/apartment
- Household items such as linens and cooking utensils
- Essential furnishings
- Moving expenses
- Services to ensure health and safety in the apartment/home (e.g., pest eradication, allergen control, one-time cleaning)

AA&S, Minor Home Modifications, and Transitional Services

AA&S, minor home modifications, and transitional services should only be developed through the brainstorming process of the CFT meeting and reflected on the Wraparound Plan. The brainstorming process identifies multiple options to meet an identified need which may include formal, informal, and natural supports and services.

After brainstorming, tasks are assigned to each CFT member to explore how the family, team, and community can help to meet this identified need, using natural supports and community resources. Informal supports, or resources provided by the community should be prioritized over formal services through the Waiver.

If all family, team, and community resources have been explored and exhausted the CFT
may determine that an adaptive aid, minor home modification, or transitional services request should be pursued. If the request meets YES Waiver policy guidelines, the Wraparound facilitator will request the service in accordance with YES policy and procedures.

Specialized Therapies

The specialized therapies offer our participants a unique opportunity to be able to express themselves through different and creative forms of therapy. Specialized therapies open the door to endless possibilities of expression to cultivate emotional resilience, build self-esteem and self-awareness, lower anxiety, and release/express feelings that YES participants may not have been able to accomplish through traditional modalities of therapy.

YES Waiver offers the following Specialized Therapies:

**Animal-Assisted Therapy**

Animals are used in goal-directed treatment sessions as a modality to facilitate optimal physical, cognitive, social, and emotional outcomes of a participant. Engaging with animals can empower participants through increasing self-esteem, increasing motivation, and reducing stress.

**Art Therapy**

Using different art mediums and engaging in the creative process of creating art, art therapy assists the participant in exploring their feelings and expressing themselves through art. Art therapy can assist participants in reconciling emotional conflicts, fostering self-awareness, managing behavior, developing social skills, improving reality orientation, reducing anxiety, and increasing self-esteem.
Music Therapy

Music therapists use music to therapeutically address physical, psychological, cognitive, or social functioning to optimize the individual's quality of life. The process of learning how to play an instrument, writing a song, or listening to music can improve functioning on all levels, enhance well-being and foster independence.

Recreational Therapy

Recreational therapy uses a wide range of activities and community-based interventions and techniques to improve the physical, cognitive, emotional, social, and leisure needs of participants. Recreational therapists assist participants to develop skills for daily living and community involvement. Activities can include yoga, dancing, hiking, swimming, exercise, and other recreational activities.

Nutritional Counseling

Nutritional Counselors provide counseling in nutritional principles and how food can impact both physical and mental health. A nutritional counselor can counsel participants on creating dietary plans, healthy choice food selections, and economics.
Reminder

Services delivered by providers are secondary to informal supports that are identified during Wraparound team meetings. The objective is for families to build upon their existing natural supports as this is more sustainable, reducing reliance on formal provider services that may not be available when participation in YES ends.
CHAPTER 5: Provider Network Development

CWPs, which include LMHAs/LBHAs and private providers, are required to develop and maintain an adequate YES provider network. An adequate provider network includes:

- Contracted qualified providers for the full YES Waiver service array
- Participant choice of qualified providers of YES Waiver services
- Participant access to providers within 30 miles of their residence (within 75 miles if participant lives in a rural area) (Performance Contract Notebook (MH/PCN) and YES Prov, 2020)

HHSC requires a CWP to be able to offer the full YES Waiver service array to all YES participants. A CWP must meet the requirements set forth in their contract to build and sustain an adequate YES provider network. If a CWP is unable to provide the complete array of services available through the YES Waiver, the CWP must perform outreach and recruitment activities to build their YES provider network.

When recruiting new providers, a CWP can either directly hire additional staff to provide YES services or subcontract with other persons or organizations to provide the service. In both options, the CWP is ultimately responsible for ensuring all parties are in compliance with HHSC’s YES Waiver provider requirements. If a CWP chooses to subcontract, the CWP is responsible for developing its own written agreements with other entities.

Reminder
This is not a comprehensive list of requirements; please refer to your organization’s contracting requirements and the YES Policy Manual. YES Waiver contracts include:

- Comprehensive Waiver Provider (YESPROV Statement of Work)
- Performance Contract Notebook (PCN)
Developing a YES Waiver Provider Network

When developing a provider network, it is important to think outside the box and take a grassroots approach. First objective is to get your YES team excited and empowered to identify potential service providers in your community. Getting out into your community and making connections with other community members can be extremely beneficial for building your YES provider network.

A helpful first step is creating a list of all potential community resources in the local area, such as:

- Local colleges and universities
- Hospitals
- Recreational centers
- Community mental health centers
- Local non-profits

After you and your YES team have brainstormed ideas and have created a list of potential community resources, it is now time to do some detective work! The internet can be your best friend when working towards building your YES provider network. Using online search engines for local animal shelters, community theatres, yoga studios, nutritionists, etc., can be very helpful and may result in positive outcomes.

Provider Network Resources

**Google**

[https://www.google.com/](https://www.google.com/)

Use keywords to find providers in your community that would qualify to provide YES Waiver services (e.g., art therapist, dietician, camp). You can also use Google Maps search to discover how close providers are to your location.
Google Maps Search
https://www.google.com/maps

Suggested Searches:
- Animal-assisted therapist
- Art therapist
- Music therapist
- Nutritionist/dietician
- Recreational therapist
- Hospital
- Camp
- University
- College
- Youth center
- Social services
- Library
Psychology Today

https://www.psychologytoday.com/us/therapists

Psychology Today allows you to search for psychologists in specific communities, while also enabling advanced searches for finding psychologists/therapists in specific fields (e.g., art therapists, play therapists, etc.)

TIP!
Psychology Today’s search engine allows you to search for mental health professionals by zip code. You can further refine your search results by insurance, issues, sexuality, age, gender, language, faith, and types of therapy!

Anxiety and Depression Association of America (ADAA) – Find a Therapist Directory

https://members.adaa.org/page/FATMain

Similar to Psychology Today, ADAA enables you to search for therapists in your community.

Texas Health and Human Services: Search for Child Care Center or Home

https://www.dfps.state.tx.us/Child_Care/Search_Texas_Child_Care/ppFacilitySearchDayCare.asp

The HHSC/DFPS search site for Child Care Centers can be utilized to find out-of-home respite providers and supportive family-based alternatives.

Respite Camps

Day or overnight camp respite service is provided only by camps that are licensed by the state of Texas or accredited by the American Camp Association (ACA).
HHSC Youth Camp Programs: Find a Licensee: 
https://www.dshs.texas.gov/youthcamp/find-a-licensee.aspx

American Camp Association: Find a Camp: http://find.acacamps.org/

**Colleges and Universities**

Colleges and universities are great resources for recruiting potential YES Waiver providers. Faculty and students who meet YES Waiver credentialing requirements may be hired to work as paraprofessionals, community living supports providers, supported and assisted employment providers, non-medical transportation providers, in-home respite providers, and other types of providers. HHSC recommends contacting the following departments at your local university or college:

**TIP!**
Graduate students studying Psychology or Social Work are always looking for programs to complete their certification hours and may want to provide YES Waiver services as an intern!

- Counseling
- Psychology
- Social Work
- Nursing
- Communication
- Education
- Natural Sciences

**Community Medical Hospitals and Psychiatric Hospitals**

Medical and psychiatric hospitals often have recreational therapists, art therapists, music therapists, animal-assisted therapists, and nutritional counselors – making them a great resource for recruiting specialized therapists. While it is important to make connections with hospitals to find providers, it is also important to build relationships with your community hospital staff so they know about the YES Waiver program and can refer children and youth.
Other Creative Search Ideas

Getting out in the community and taking a grass roots approach to build your YES provider network can make a huge difference! Some examples of where you and your team can explore options in the community include:

- Community Resource Coordination Group meetings
- Coffee shops
- Community mental health centers
- Local non-profits
- Recreation Centers
- Child-serving agencies

Posting job opportunities on different websites can also be helpful in finding providers.

- Your organization’s website
- Craigslist
- Local newspapers
- Pinterest
- Indeed
- Facebook
- LinkedIn
Specialized Therapies: Certification Boards

When searching for specialized therapists, it can be helpful to begin by searching the different certification board websites that list all certified therapists for each specialized area of focus.

<table>
<thead>
<tr>
<th>Association/ Certification Board</th>
<th>Website</th>
<th>Phone Number</th>
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<tbody>
<tr>
<td>Art: Art Therapy Credentials Board (AT-BC)</td>
<td><a href="https://www.atcb.org/Home/FindACredentialsArtTherapist">https://www.atcb.org/Home/FindACredentialsArtTherapist</a></td>
<td>(877) 213-2822</td>
</tr>
<tr>
<td>Art: American Art Therapy Association</td>
<td><a href="https://arttherapy.org/art-therapist-locator/">https://arttherapy.org/art-therapist-locator/</a></td>
<td>(888) 290-0878</td>
</tr>
<tr>
<td>Animal Assisted: Professional Association of Therapeutic Horsemanship International (PATH Intl.)</td>
<td><a href="https://fontevacustomer-15cf09b5446.force.com/s/searchdirectory?id=a2If40000019X09">https://fontevacustomer-15cf09b5446.force.com/s/searchdirectory?id=a2If40000019X09</a></td>
<td>(800) 369-7433</td>
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<tr>
<td>Animal Assisted: Trauma Focused Equine Assisted Psychotherapy (TF-EAP)</td>
<td><a href="https://naturallifemanship.com/practitioner-listings/">https://naturallifemanship.com/practitioner-listings/</a></td>
<td>(512) 571-2727</td>
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<td>Animal Assisted: Equine Therapy Registry</td>
<td><a href="https://www.equinetherapyregistry.org/index.php/registry/listings">https://www.equinetherapyregistry.org/index.php/registry/listings</a></td>
<td>N/A</td>
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<tr>
<td>Music: American Music Therapy Association</td>
<td><a href="https://www.musictherapy.org/about/find/">https://www.musictherapy.org/about/find/</a></td>
<td>(301) 589-3300</td>
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<tr>
<td>Nutrition: Academy of Nutrition and Dietetics</td>
<td><a href="https://www.eatrighttexas.org/about/find-a-dietitian-nutritionist/">https://www.eatrighttexas.org/about/find-a-dietitian-nutritionist/</a></td>
<td>(469) 213-8651</td>
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<tr>
<td>Association/ Certification Board</td>
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<tr>
<td>Recreation: Therapeutic Recreation Specialist Texas (TRS/TXC)</td>
<td><a href="https://ctractexas.org/ctrac-verification/">https://ctractexas.org/ctrac-verification/</a></td>
<td>(512) 848-7559</td>
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</tbody>
</table>

**Reminder**

Apart from nutritional counseling, all specialized therapies have the option for individuals to be certified by the approved HHSC certification and licensing boards listed in the YES Policy Manual OR be a licensed professional with documented training and experience relative to the specific service provided. (Refer to YES Policy Manual for additional information on provider qualifications)

**Community Outreach**

Once you have a comprehensive list of potential providers to contact, divide the list among staff and set weekly goals for the number of contacts you and your team are going to make. Getting out into your community goes a long way and you may be surprised by the positive response you receive. Always leave an informational YES Waiver flyer with your contact information when you are out in the community.

**TIP!**

Providers can provide more than one YES service to youth and families. As an example, a paraprofessional could also provide in-home respite and/or employment assistance. Or, an art therapist could also provide music therapy as long as they meet the qualifications.

**YES Outreach Materials and Provider Recruitment**

All organizations should create job descriptions and post job openings on your organization’s website to recruit providers for any YES services that are not yet in your service array or are only offered by one provider. Using the YES Policy Manual to create job descriptions is also a great way to highlight service descriptions, provider qualifications, and expectations.
Distributing printed copies of the HHSC YES Waiver provider brochure, “YES Waiver: Information for Individual Service Providers and Provider Agencies Serving Youth and Families,” to your team will also help with program awareness and visibility when you or your team members are out in the community.

**YES Marketing Templates**

Marketing templates have been created to assist your outreach efforts. The YES Provider Outreach Flyer is formatted as a pdf document and has been developed to allow you to edit the contact information box to include your organization’s name, point of contact, phone number, and email address.

The Family and Youth Outreach Flyer is unique to your individual organization and includes your address, inquiry line number, and counties served.

These flyers can be distributed in-person or electronically at community events, schools, college campuses, coffee shops, and any other creative places you can think of sharing information about the YES Waiver program.
Ordering YES Materials from HHSC Pinnacle

All brochures and additional marketing materials can be ordered at no cost through the HHSC Forms and Print Product Catalog, known as the Pinnacle.

Registration is required to place an order. If you have never registered with the Pinnacle, just complete the simple registration process and enter “YES” into the search bar to find YES marketing materials. Some items have order limits (number of items allowed per order) but you may place as many orders as needed.

All marketing materials are available in both English and Spanish.

Creating Your Own Marketing Materials:

While organizations are able to create their own YES Waiver marketing materials, please note:

“Any information developed by YES Waiver Providers and intended for distribution in accordance with their outreach and marketing plan, must be submitted to, and approved by, HHSC prior to dissemination. All outreach material templates must be submitted electronically to HHSC at the beginning of the Waiver year and any new or updated outreach material that is created thereafter must be submitted to, and approved by, HHSC prior to dissemination. Outreach material should be available in both English and Spanish.” - YES Waiver Policy Manual, 2020
If you create your own YES Waiver marketing materials, please email all materials to the YES Waiver inbox at YESWaiver@hhsc.state.tx.us for approval before use.

**Quarterly Provider Network Development Report**

All provider outreach and recruitment efforts to establish and maintain provider network adequacy must be documented in your quarterly provider network development report on the "Pending Providers & Recruitment" tab.

**Pending Providers and Recruitment Contacts Made**

<table>
<thead>
<tr>
<th>Date of Contact</th>
<th>Provider/Organization Name</th>
<th>Service Description</th>
<th>Name of Provider Contact</th>
<th>Subcontractor or Staff</th>
<th>Pending Provider or Initial Recruitment</th>
<th>Referral Method/Creative Approaches Taken to Build Provider Network</th>
</tr>
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<tbody>
<tr>
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</table>

**Reminder**

When completing the “Pending Providers and Recruitment Contacts Made” tab you should document all outreach and recruitment efforts made by your entire team. It is acceptable to only complete the “Date of Contact” and “Referral Method/Creative Approaches Taken to Build Provider Network” if no other information is available to document.
Chapter 6: Onboarding New Staff and Providers

When someone expresses interest in becoming a YES Waiver provider, you should have an efficient process in place for contracting, on-boarding, and ensuring initial trainings are completed. If your organization has a human resources and/or contracting department(s), partner with them and learn about everything that is required of new staff or sub-contractors.

Prepare the necessary checklists, forms, and letters needed to bring a new YES provider on board. HHSC requires specific minimum training standards outlined in the policy manual, but your organization may have additional required trainings for new staff and sub-contractors to prepare them for providing YES services.

Reminder
All YES Waiver providers are required to submit their policies and procedures to HHSC for review and approval, in accordance with contract requirements, or at any time upon request by HHSC.

Trainings for YES Service Providers

HHSC requires sufficient training and education for all YES Waiver providers that serve YES participants. For this reason, YES Waiver providers must ensure that all staff providing any type of direct service to YES participants, as well as subcontracted providers and their YES provider staff, receive the following required trainings prior to delivering Waiver services and/or participating in CFT meetings (HHSC, 2020).

All YES Waiver background checks and training requirements are located in the YES Waiver Policy Manual
Required YES Waiver Trainings and Resources

All staff including direct service staff and their leadership with oversight of the YES Waiver program at a WPO, CWP, or subcontractor agency must complete the trainings listed below:

- YES Waiver 101
- NWIC “What is This Thing Called Wraparound”
- Team Roles in Wraparound
- Critical Incident Training
- Reporting of Abuse, Neglect, or Exploitation
- Restraint and Restrictive Interventions
- Health Insurance Portability and Accountability Act (HIPAA) Training
- DFPS Trauma Informed Care
- Child and Adolescent Needs Assessment (CANS) (required for CANS Assessors, recommended for staff in other roles), and
- Crisis and Safety Planning

In addition to the trainings above, Wraparound Supervisors and Wraparound Facilitators must also complete the following trainings:

- Introduction to Wraparound
- Engagement Training, and
- Intermediate Wraparound
- Advancing Wraparound Practice: Supervision and Managing to Quality (for YES Program Managers/Supervisors)

In addition to required training, all organizations should provide adequate, role specific, foundational orientation to their staff to ensure competency in the following areas:
All YES Waiver required trainings, including web-based trainings and in-person trainings, require certificates of completion or other documentation that states the training title, staff name, and date of completion to indicate the training was completed. Each YES Waiver provider agency must maintain all training documentation in personnel files, which must be both readily available and accessible for the HHSC QM team to review during both desk and onsite reviews.

**Recommended Trainings**

YES Waiver providers are also responsible for implementing and maintaining a plan for continuous training of all staff members providing direct services to YES participants. The trainings below are recommended for staff at all levels:

- Cultural Competency (Administrator Track/Provider Track)
- Suicide Prevention (in-person or online training)
- Mental Health First Aid
- Mental Health Wellness for Individuals with Intellectual and Developmental Disabilities Parts 1 – 9
- Harm Reduction Training
- Assessing Trauma in Individuals with Intellectual and Developmental Disabilities
- Psychotropic Medication Training
Chapter 7: Identifying and Engaging Youth and Families

Just as being creative and thinking outside of the box are essential in provider outreach and development, the same concepts apply to how you market YES Waiver to youth and families. YES Waiver is still a relatively new program and many families may not be aware of it or know how to get enrolled. That is why engaging youth and families and informing them about YES Waiver is so important.

Marketing YES Waiver to Youth and Families

Making connections in your communities and educating other organizations, individuals, schools, and programs about YES Waiver is critical to building referral sources.

Here are some strategies for marketing YES Waiver to youth and families:

- Post information about YES and the inquiry line number in an easy-to-find place on your organization’s website
- Identify eligible youth within other organizations
- Distribute flyers and posters in your community
- Attend Community Resource Coordination Group meetings
- Present at public forums:
  - Schools
  - Juvenile justice
  - Child welfare
  - Mental health coalition meetings
- Encourage families to share their experiences with people they know
- Use social media
- Get creative!
How to Explain YES Waiver to Youth and Families

It is important that any provider involved with YES Waiver to be able to effectively explain to youth and families what the YES Waiver program is and how it can benefit their family.

Talking Points for Explaining YES to Youth and Families

- **YES Waiver Eligibility**
  - Youth must be 3 through 18 years old
  - Have serious mental, emotional, behavioral difficulties;
  - Have a qualifying mental health diagnosis; and
  - Are at risk of being removed from their home due to their mental health needs.

- **YES Waiver Goals**
  - Keep your child or adolescent in the home with you and avoid higher levels of care
  - Provide unique and creative services to support your family
  - Improve the mental and emotional well-being of your child or adolescent and provide hope to your family that anything is possible

- **YES Waiver Benefits**
  - You and your child or adolescent are supported by a team
  - Services and supports target your child or adolescent and family’s needs
  - You and your child or adolescent can access services that are only available through YES, and supports help your child or adolescent stay in
your home and community

- **What is Wraparound**
  - Wraparound is a team-based care coordination process that is strengths-based and supports youth and families to meet their own goals and visions

- **YES Waiver Services**
  - You and your child can access unique and creative services that are only available through YES, such as art, animal, music, and recreational therapy!

- **Length of the Program**
  - YES is not intended to be long-term
  - The average length of enrollment in YES is 11-18 months

**Reminder**

When families or individuals call the inquiry line all centers are expected to utilize the inquiry line script located in the [YES Waiver User Guide: Appendix A Inquiry List](#). The script has important information to share with families about the YES Waiver program.

---

**Engaging Youth and Families**

It is important to keep in mind that most of the youth and families who seek YES Waiver services have attempted other options and have not had success with traditional treatment models. It is our responsibility to provide youth and families quality support and build trusting relationships that will empower families to regain ownership of their lives and experience the process of transformation, healing, and self-defined success.

Initially, families may be hesitant about the intensity of YES Waiver and the level of
participation requested. YES Waiver is a comprehensive program that provides a lot of options for youth and families and sometimes that can be overwhelming. The first step to engaging youth and families is building trust. During rapport building, mutually-beneficial relationships are built, and transformation begins to take place.

**Engaging Teenagers**

Data show that approximately 60 percent of YES Waiver participants are between the ages of 13 and 19. The mental, emotional, and behavioral health needs of YES teenagers present additional challenges to the everyday pressures most teenagers face. For many YES teens, their struggles consume their lives and make it difficult to feel safe or secure in their homes, communities, bodies, and/or minds.

Sadly, it is common for teens struggling with pain and trauma to make those feelings a part of their life story. Often, they end up carrying that engrained narrative of sadness and pain into their adult years which can have serious negative impacts on their quality of life. It is our responsibility to help them re-write their narratives and provide tools and support that can transform their beliefs into stories of empowerment, healing, resilience, and transformation.

As a natural and essential part of teenager’s development process, they frequently experience:

- A need to explore their identity
- A desire for privacy
- A desire to be independent
- A strong connection to their peers

It is important to understand these inclinations and accept them as exactly who they are and want to be.
Tips for Connecting with Teens

1. LISTEN!
2. Build trust
3. Don’t speak in jargon
4. Be authentic, honest, and transparent
5. Don’t be judgmental: accept them for who they are
6. Build on their strengths
7. Use culture to connect (music, fashion, celebrities, TV shows, apps)
8. Give them choices
9. Encourage community involvement and volunteer work
10. Work with them, not for them (youth voice/engagement)

As you connect more with the teen you are working with, you can begin to work with them to identify YES Waiver services and community resources that align with their passions and goals.

Remember the 10 principles of the Wraparound Process

Make an intentional effort every single time you are working with youth and families to implement all ten of the Wraparound principles while engaging with the youth and family.

1. Family voice and choice. Family and youth perspectives are intentionally elicited and prioritized during all phases of the Wraparound process. Planning is grounded in family members’ perspectives, and the team strives to provide options and choices such that the plan reflects family values and preferences.

2. Team based. The Wraparound team consists of individuals agreed upon by the family and committed to the family through informal, formal, and community support and service relationships.

3. Natural supports. The team actively seeks out and encourages the full participation of team members drawn from family members’ networks of interpersonal and community relationships. The Wraparound Plan reflects activities and interventions that draw on sources of natural support.
4. **Collaboration.** Team members work cooperatively and share responsibility for developing, implementing, monitoring, and evaluating a single Wraparound Plan. The plan reflects a blending of team members’ perspectives, mandates, and resources. The plan guides and coordinates each team member’s work towards meeting the team’s goals.

5. **Community-based.** The Wraparound team implements service and support strategies that take place in the most inclusive, most responsive, most accessible, and least restrictive settings possible; and that safely promote child and family integration into home and community life.

6. **Culturally competent.** The Wraparound process demonstrates respect for and builds on the values, preferences, beliefs, culture, and identity of the youth and family, and their community.

7. **Individualized.** To achieve the goals laid out in the Wraparound Plan, the team develops and implements a customized set of strategies, supports, and services.

8. **Strengths based.** The Wraparound process and the Wraparound Plan identify, build on, and enhance the capabilities, knowledge, skills, and assets of the child and family, their community, and other team members.

9. **Unconditional.** A Wraparound team does not give up on, blame, or reject children, adolescents, and their families. When faced with challenges or setbacks, the team continues working towards meeting the needs of the youth and family and towards achieving the goals in the Wraparound plan until the team reaches agreement that a formal Wraparound process is no longer necessary.

10. **Outcome based.** The team ties the goals and strategies of the Wraparound Plan to observable or measurable indicators of success, monitors progress in terms of these indicators, and revises the plan accordingly.
Celebrating Success

Success should be celebrated constantly. Celebrating success doesn’t just mean the youth is graduating out of the YES Waiver program. While it is extremely important to acknowledge all the youth and family’s accomplishments when they graduate from YES, it is just as important to celebrate the little and big successes that occurred throughout the process that helped guide the youth and family to the finish line.

Example: A participant may enter the YES program with a tendency to get into fights with their siblings. Perhaps it is noted at an initial CFT that the participant is fighting with their siblings at least two times a day, every day. If at the following CFT meeting you learn that the participant has only been fighting with their siblings once a day, six days a week – that is a SUCCESS and therefore, should be celebrated through acknowledgement and praise for the participant’s accomplishment in decreasing their negative behaviors.

Reminder
Success can be celebrated at every Wraparound meeting when a participant has met an outcome or made progress in any area of their life.
First 30 Days in YES

YOUTH EMPOWERMENT SERVICES
FIRST 30 DAYS

1. Call Received through Inquiry Line
2A. Assessment Conducted - Demographic (Phone)
2B. Assessment Conducted - Clinical (In Person)
3. Eligibility Notification to Family
4. Initial Intake, Safety Plan and Services with Wraparound Facilitator
5. First Child and Family Team Meeting
Chapter 8: YES Implementation and Leadership Support

Whether you are a new organization in the beginning stages of developing your YES Waiver program or an organization that has been providing YES services for years, it is imperative to implement and provide a high-quality YES program for both youth and families and for your staff.

High Quality YES Waiver Implementation

The National Implementation Research Network’s Implementation Drivers Framework (Fixen, Naom, Blase, Friedman, & Wallace, 2005) provides a roadmap for the organizational-level drivers of high-quality implementation of client services such as those supported by YES Waiver. The following provides a broad overview of those drivers.

1. **Competency Drivers** are mechanisms to develop, improve, and sustain one’s ability to implement an intervention as intended, to benefit youth, families, and communities.
   a. **Recruitment and Selection of Staff**: Specification of required skills and abilities with the pool of candidates; methods for recruiting likely candidates that possess these skills and abilities; protocols for interviewing candidates, and; criteria for selecting practitioners with those skills and abilities.
   b. **Training**: Provide knowledge related to the history, theory, philosophy, and values of the model and organization; introduce the components and rationales of key practices, and; provide opportunities to practice new skills to criterion and receive feedback in a safe and supportive training environment.
   c. **Coaching**: An effective coach provides information along with advice, encouragement, and opportunities to practice and use skills specific to the innovation.
   d. **Performance Assessment**: Designed to assess the use and outcomes of the skills that are reflected in the selection criteria, taught in training, and reinforced and expanded in coaching processes.
2. **Organization Drivers** are mechanisms to create and sustain hospitable organizational and system environments for effective services.
   
a. **Systems Intervention**: Strategies for leaders and staff within an organization to work with external systems to ensure the availability of the financial, organizational, and human resources required to support the work of the practitioners.
   
b. **Facilitative Administrative Supports**: Careful attention given to policies, procedures, structures, culture, and climate to assure alignment of these aspects of an organization with the needs of practitioners.
   
c. **Decision Support Data Systems**: Making use of a variety of measures to assess key aspects of the overall performance of an organization; provide data to support decision making, and; assure continuing implementation of the evidence-based intervention and benefits to children and families over time.

3. The **Leadership Driver** focuses on providing the right leadership strategies for the type of leadership challenges. These leadership challenges often emerge as part of the change management process needed to make decisions, provide guidance, and support organization functioning. Leadership needs change as implementation progresses—“adaptive leadership” styles are needed to “champion change” in the beginning; more technical leadership styles are needed to manage the continuing implementation supports (e.g., selection interviews, performance assessments, system interventions) for effective organizations over the long run (Fixen, Naoom, Blase, Friedman, & Wallace, 2005).

All these drivers should be considered when an organization is considering implementing any new service or support. In addition, these drivers should be integrated and connected in the planning and implementation process to inform the ongoing effort. For example, data on outcomes for youth supported by an organization should routinely be shared with leadership and staff to inform targeted system interventions and improve organizational performance.

**Questions for Consideration**

One way to ensure high quality implementation occurs in your organization is to identify an implementation team comprised of executive leadership, mid-management and line staff, and a leadership structure that supports implementation through a continuous quality improvement approach. With this
approach, an implementation team meets regularly to monitor progress with implementation, identify barriers, problem solve, and review data.

**YES Implementation Team:**

1. Who are the critical persons within your organization who should serve as a part of an implementation/leadership team?
2. How will the implementation team ensure they routinely communicate, review data, and address barriers toward implementation?
3. What strategies will be used to maintain leadership buy in and support for your implementation of YES Waiver?
4. What training or technical assistance do you feel your organization needs to support the organization’s implementation team in implementing YES Waiver?
5. What quality indicators will you track and monitor to ensure effective implementation of YES Waiver?

**YES Eligibility:**

1. How will assessments be coordinated between the Inquiry Line and the LPHA conducting the assessments?
2. Who, specifically, will be conducting assessments for YES Waiver?
3. For youth who do not currently have Medicaid who will be coordinating the completion and submission of this paperwork for YES Waiver eligibility determination?
4. How will families be connected to TRR services while navigating the Medicaid application process?
5. How will families be notified of their eligibility for YES Waiver?
6. Youth who are determined to not be eligible for YES Waiver are entitled to a fair hearing. Who will handle all requests for fair hearings for your organization?
7. How will the organization process fair hearing requests internally and in collaboration with HHSC?
YES CWP Selection:

1. How will your organization/agency ensure family’s make an informed decision on their CWP selection (e.g., provide a written and verbal overview of each CWP)?

2. How will your organization ensure the family’s selection of the CWP is not influenced in anyway?

3. How will your organization include the CWP in the first CFT?

4. How will the Wraparound Plan be shared with the YES providers on the CFT?

5. How will your organization ensure ongoing communication and collaboration between the CWP?

YES CWP Services:

1. Does the CWP currently include partnerships with providers for each of the YES Waiver services and supports (see Organizational Readiness Tool) for all counties within the CWP catchment area?

2. Are there multiple providers for each service within the counties in the CWP catchment area (see Organizational Readiness Tool)?

3. If services are not available in all counties in the CWP catchment area, what plans are in place to develop more providers for the provider network in the regions they are currently missing?

4. If multiple providers are not available for all the YES services in the CWP catchment area, how does your organization plan on developing or engaging additional providers?

YES Provider CFT Participation and the Wraparound Plan:

1. What considerations should your organization/agency consider ensuring provider participation in the CFT meetings?

2. How does your organization intend to communicate with providers around the implementation of the Wraparound Plan?
## Organizational Readiness Tool

**Agency Name:** _____________________________

**Counties Served:** ___________________________

<table>
<thead>
<tr>
<th>Service</th>
<th>Providers Available in All Counties?</th>
<th>Providers Available in Some Counties?</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Living Supports</td>
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<tr>
<td>Employment Services</td>
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<tr>
<td>Family Supports</td>
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<td>Paraprofessionals</td>
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<td>Respite-In Home</td>
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<tr>
<td>Out-of-Home Respite</td>
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<tr>
<td>Service</td>
<td>Providers Available in All Counties?</td>
<td>Providers Available in Some Counties?</td>
<td>Notes</td>
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<tr>
<td>Supportive Family Based Alternatives</td>
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<td>Non-Medical Transportation</td>
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<tr>
<td>Animal-Assisted Therapy</td>
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<tr>
<td>Art Therapy</td>
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<td>Music Therapy</td>
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<tr>
<td>Recreational Therapy</td>
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<tr>
<td>Nutritional Counseling</td>
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</tbody>
</table>
1. Where is your center in the process of implementing high fidelity Wraparound?

   - How many facilitators do you have trained? __________
   - How many supervisors do you have trained? __________
   - What are the caseload sizes of wraparound facilitators? ______

2. Do you have a long-term plan for maintaining, recruiting, and training Wraparound facilitators?

3. What is the availability of YES Waiver services in the counties served by your center?

4. Are there agencies in your community that may be willing to serve as a comprehensive YES Waiver Provider? If so, please provide names and any other information.
It is important for every organization involved with YES Waiver to seek out new training opportunities and resources to share with your team. Social services are constantly evolving and new research, data, trainings, etc. are getting released to the field every day. In order to provide the highest quality of services and supports to youth and families in YES Waiver, providers must stay up to date on any new information being released to the field that can be applied to our daily practices. Below we will discuss two important resources/philosophies that should be implemented throughout every layer of your organization.

**System of Care**

System of care is a framework and philosophy for the transformation of child-serving systems. Established over 25 years ago to better meet the needs of children, youth, and young adults with mental health challenges and their families, this framework has been used across the country to build more accessible, responsive, and effective arrays of services and supports.

A system of care is a spectrum of effective community-based services and supports for children, youth, and young adults with or at risk for mental health and related challenges and their families that is organized into a coordinated network, builds meaningful partnerships with families and youth, and addresses their cultural and linguistic needs in order to help them function better at home, in school, in the community, and throughout life (Texas System of Care, 2020).

**Core Values**

Systems of care core values are:

*Family-driven* and *youth-guided* with the strengths and needs of the child and family determining the types and mix of services and supports provided.

*Community-based* with the locus of services as well as system management resting within a supportive, adaptive infrastructure of structures, processes, and relationships at the community level.

*Culturally and linguistically competent* with agencies, programs, and services that reflect the cultural, racial, ethnic, and linguistic differences of the populations they
serve to facilitate access to and utilization of appropriate services and supports and to eliminate disparities in care.

**System of Care: Guiding Principles**

1. Provide individualized services in accordance with the unique potentials and needs of each child and family, guided by a strengths-based, Wraparound service planning process, and an individualized service plan developed in true partnership with the child and family.

2. Ensure that services and supports include evidence-informed and promising practices, as well as interventions supported by practice-based evidence, to ensure the effectiveness of services and improve outcomes for children and their families.

3. Deliver services and supports within the least restrictive, most normative environments that are clinically appropriate.

4. Ensure that families, other caregivers, and youth are full partners in all aspects of the planning and delivery of their own services and in the policies and procedures that govern care for all children and youth in their community, state, territory, tribe, and nation.

5. Ensure that services are integrated at the system level, with linkages between child-serving agencies and programs across administrative and funding boundaries and mechanisms for system-level management, coordination, and integrated care management.

6. Provide care management or similar mechanisms at the practice level to ensure that multiple services are delivered in a coordinated and therapeutic manner and that children and their families can move through the system of services in accordance with their changing needs.

7. Provide developmentally appropriate mental health services and supports that promote optimal social-emotional outcomes for young children and their families in their homes and community settings.

8. Provide developmentally appropriate services and supports to facilitate the transition of youth to adulthood and to the adult service system as needed.

9. Incorporate or link with mental health promotion, prevention, and early identification and intervention to improve long-term outcomes, including mechanisms to identify problems at an earlier stage and mental health promotion and prevention activities directed at all children and adolescents.
10. Incorporate continuous accountability and quality improvement mechanisms to track, monitor, and manage the achievement of system of care goals; fidelity to the system of care philosophy; and quality, effectiveness, and outcomes at the system level, practice level, and child and family level.

11. Protect the rights of children and families and promote effective advocacy efforts.

12. Provide services and supports without regard to race, religion, national origin, gender, gender expression, sexual orientation, physical disability, socio-economic status, geography, language, immigration status, or other characteristics, and services should be sensitive and responsive to these differences (Texas System of Care, 2020).

Trauma-Informed Care

In addition to the DFPS Trauma-Informed Care training that is required by all layers of staff and leadership within your organization, it is strongly encouraged that trauma-informed care practices be implemented throughout all layers of your organization. Every staff member should understand how trauma impacts individuals and how prevalent trauma is amongst the population we serve.

"Individual trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual’s functioning and mental, physical, social, emotional, or spiritual well-being.” (SAMHSA, 2014)

Trauma-Informed Care Resources

There are many trauma-informed care resources that can be accessed for free online. Below are a few resources. We also recommend finding additional resources that you can use in your daily practice.
<table>
<thead>
<tr>
<th>Name of Resource with Website Link</th>
<th>Information about Resource</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach</strong></td>
<td>Provides a comprehensive overview of what trauma is, how trauma impacts individuals, and how organizations can implement trauma-informed care practices and approaches.</td>
</tr>
<tr>
<td><strong>National Council for Behavioral Health: Trauma-Informed Care Organizational Self-Assessment</strong></td>
<td>National Council experts can help entities, spanning community behavioral health organizations, government systems, schools, primary care clinics, social services, and law enforcement, develop and operationalize plans for becoming trauma-informed.</td>
</tr>
<tr>
<td><strong>The National Child Traumatic Stress Network</strong></td>
<td>The National Child Traumatic Stress Network was created to raise the standard of care and increase access to services for children and families who experience or witness traumatic events.</td>
</tr>
</tbody>
</table>
Conclusion

Thank you for your commitment to serve youth and families in YES Waiver. Some days the journey to learning all the pieces of YES Waiver may feel long, but there will always be light at the end of the tunnel. Because of you and your commitment to this program, youth are getting the opportunity to stay in their own homes and communities.

No matter what your role is within YES Waiver, you are vital to the success of this program. We are grateful to have you as part of the YES team.
## List of Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Full Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>AA&amp;S</td>
<td>Adaptive Aids and Services</td>
</tr>
<tr>
<td>CANS</td>
<td>Child and Adolescent Needs and Strengths Assessment</td>
</tr>
<tr>
<td>CE</td>
<td>Clinical Eligibility</td>
</tr>
<tr>
<td>CIR</td>
<td>Critical Incident Report</td>
</tr>
<tr>
<td>CFT</td>
<td>Child and Family Team</td>
</tr>
<tr>
<td>CLS</td>
<td>Community Living Supports</td>
</tr>
<tr>
<td>CMBHS</td>
<td>Clinical Management for Behavioral Health Services</td>
</tr>
<tr>
<td>CMS</td>
<td>Centers for Medicaid &amp; Medicare Services</td>
</tr>
<tr>
<td>CWP</td>
<td>Comprehensive Waiver Provider</td>
</tr>
<tr>
<td>DFPS</td>
<td>Texas Department of Family and Protective Services</td>
</tr>
<tr>
<td>DSHS</td>
<td>Texas Department of State Health Services</td>
</tr>
<tr>
<td>EMR</td>
<td>Employee Misconduct Registry</td>
</tr>
<tr>
<td>HHSC</td>
<td>Texas Health and Human Services Commission</td>
</tr>
<tr>
<td>HIPAA</td>
<td>Health Insurance Portability and Accountability Act</td>
</tr>
<tr>
<td>ICM</td>
<td>Intensive Case Management</td>
</tr>
<tr>
<td>IDD</td>
<td>Intellectual and Developmental Disabilities</td>
</tr>
<tr>
<td>IPC</td>
<td>Individual Plan of Care</td>
</tr>
<tr>
<td>LAR</td>
<td>Legally Authorized Representative</td>
</tr>
<tr>
<td>LBHA</td>
<td>Local Behavioral Health Authority</td>
</tr>
<tr>
<td>LMHA</td>
<td>Local Mental Health Authority</td>
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<tr>
<td>LOC</td>
<td>Level of Care</td>
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<tr>
<td>MBOW</td>
<td>Behavioral Health Outpatient Data Warehouse</td>
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<tr>
<td>NWIC</td>
<td>National Wraparound Implementation Center</td>
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<tr>
<td>QM</td>
<td>Quality Management</td>
</tr>
<tr>
<td>RTC</td>
<td>Residential Treatment Center</td>
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<tr>
<td>SED</td>
<td>Serious Emotional Disturbance</td>
</tr>
<tr>
<td>TAC</td>
<td>Texas Administrative Code</td>
</tr>
<tr>
<td>TCM</td>
<td>Targeted Case Management</td>
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<tr>
<td>TRR</td>
<td>Texas Resilience and Recovery</td>
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<tr>
<td><strong>Acronym</strong></td>
<td><strong>Full Name</strong></td>
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<tr>
<td>UA</td>
<td>Uniform Assessment</td>
</tr>
<tr>
<td>UM</td>
<td>Utilization Management Guidelines</td>
</tr>
<tr>
<td>WPO</td>
<td>Waiver Provider Organization</td>
</tr>
<tr>
<td>YES</td>
<td>Youth Empowerment Services</td>
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</tbody>
</table>
References

† Trainings and resources are subject to change, please review the YES Policy Manual for current training requirements.


Performance Contract Notebook (MH/PCN) and YES Prov. (2020, April).
