

**Joint Committee on Access and Forensic Services  
FINAL DRAFT: Meeting Minutes  
Wednesday, April 20, 2022  
10:00 a.m.**

**Physical Location: Department of State Health Services  
Robert Bernstein Bldg., Room K-100  
1100 49th Street  
Austin, TX 78756  
TEAMS Virtual Meeting**

**Agenda Item 1: Opening remarks and introductions**

The Joint Committee on Access and Forensic Services (JCAFS) meeting was called to order at 10:05 a.m. by Sheriff Dennis Wilson, Chair. Sheriff Wilson welcomed everyone to the meeting and provided opening remarks.

Ms. Kayla Cates-Brown, facilitator with the Health and Human Services Commission (HHSC), Advisory Committee Coordination Office (ACCO), announced that the meeting was being conducted in accordance with the Texas Open Meetings Act, and conducted the member roll call. The presence of quorum for the meeting was announced.

Table 1: JCAFS member attendance at the Wednesday, April 20, 2022 meeting.

MEMBER NAME	YES	NO	MEMBER NAME	YES	NO
Allison, Jim - Representing County Judges and Commissioners Association of Texas		X	Johnson, Windy – Representing the Texas Conference of Urban Counties	X	
Alsup, Bill – Texas Municipal League		X	Johnston, Judge Robert – County Judges and Commissioners Association of Texas	X	
Beach, Doug - Representing as BHAC Chair	X		Saenz, Vanessa – Representing as consumer of or advocate for mental health services	X	
Carr, Shannon - Representing the Austin Area Mental Health Consumers, Inc.	X		Smith, Shelley – Representing the Texas Council of Community Centers	X	
Cogbill, Sherri – Representing Texas Department of Criminal Justice (TDCJ)		X	Taylor, Sally MD – Representing the Texas Hospital Association as a physician	X	
Evans, David – Representing the Texas Council of Community Centers	X		Wagner, Judge J.D. - Representing the Texas County Judges Association		X
Glazier, Stephen – Representing the Texas Hospital Association			Wilson, Sheriff Dennis – Representing the Sheriffs' Association of Texas	X	
Gray, Anna - Representing as consumer of or advocate for substance abuse treatment	X		VACANT		
			VACANT		

Yes: Indicates attended the meeting in-person No: Indicates did not attend the meeting

## **Agenda Item 2: Consideration of the Draft January 26, 2022 committee meeting minutes**

Sheriff Wilson requested members review the minutes and asked for a motion to approve the minutes from the January 26, 2022 committee meeting.

**MOTION:** Ms. Anna Gray moved to approve the minutes from the January 26, 2022 committee meeting as presented in the meeting. Ms. Shannon Carr seconded the motion. After conducting a roll call vote of the members, the motion unanimously passed with 10 yeas (Beach, Carr, Evans, Glazier, Gray, Johnston, Saenz, Smith, Taylor, Wilson), no nays and no abstentions.

## **Agenda Item 3: Announcement – Revision of bylaws for this calendar year**

Sheriff Wilson introduced Ms. Adriana Flores, Committee Liaison, HHSC. Ms. Flores announced that this is the year the committee will be reviewing the bylaws. The bylaws will be sent to committee members.

## **Agenda Item 4: Subcommittee Reports**

Sheriff Wilson introduced Mr. David Evans, who provided members with an update from the Access Subcommittee. At the conclusion of Mr. Evans's update, Sheriff Wilson introduced Mr. Stephen Glazier who provided members with an update from the Data Analysis Subcommittee.

Highlights of the update and committee member discussion included:

a). Access Subcommittee -

- The subcommittee reviewed interview questions for the UR Protocol; one set of questions for staff and another set for patients/family members.
- Their next meeting will be May 10<sup>th</sup>.

b). Data Analysis Subcommittee –

- A member of the Judicial Committee on Mental Health, John Petrilo, joined the subcommittee.
- Subcommittee members are looking at county level data: trends of the last 6 months for average wait list; criteria focus on those doing well, those struggling, and those in the middle.
- Goal for the subcommittee is to analyze data to get information for data driven recommendations for policy and legislative actions before the end of summer.
- Looking at the maximum-security waitlist – is it growing faster than the non-maximum?
- Grouping counties into three similar size groups and comparing them to each other.
- Looking at counties that have all services (jail-based, outpatient, and diversion) vs. those that have none or some.
- Looking into why misdemeanors seem nationally more likely to be determined incompetent on an initial evaluation than felonies.

## **Agenda Item 5: JCAFS Dashboard**

Sheriff Wilson introduced Mr. Logan Hopkins, HHSC who provided members with an update on the JCAFS Dashboard.

Highlights of the update and committee member discussion included:

- MSU for Jan. and Feb. had no admissions from MSU waitlist to a unit; relatively high number of people added to the list, but few taken off.
- Deputy Executive Commissioner Scott Schalchlin explained that the jump of beds unavailable is due to a mix of COVID and workforce issues.

### **Agenda Item 6: Health and Specialty Care System (HSCS) Updates and Actions to Impact Forensic Waitlist**

Sheriff Wilson introduced Deputy Executive Commissioner Scott Schalchlin, HHSC, who provided members with HSCS updates and actions to impact forensic waitlist.

Highlights of the committee member discussion included:

- Workforce field positions are down 20% from 2020 to 2022; this workforce challenge impacts the number of beds.
- Some SSLCs take patients from state hospitals who have Intellectual and Developmental Disabilities (IDD), and workforce for this population is also down.
- Actions taken to address workforce challenges:
  - Looking at pay and career development within the system.
  - Restructuring of HSCS to improve staff support services.
  - Recruitment and retention:
    - Establish a workgroup to look at how to bring people in, flexible schedules, work different hours.
    - Retention specialist in facilities who interview staff about what they need and if they got what they needed.
  - Working on improving culture so people aren't focused on high turnover.
  - Possibly allowing people to work immediately instead of waiting for the 1<sup>st</sup> and 15<sup>th</sup> of the month. Shadow staff before they start their employee orientation.
  - Looking at supervisory and leadership development.
  - Recruitment bonuses have been hit or miss.
  - Salary increases effective March 1 for all staff; 10% raise for nurses and direct service staff, 10% raise to lower paid staff, 7% for mid, and 5% to higher level.
  - Developed website to link to state application.
  - Looking at areas that may have higher applicant numbers and invest time and money in those areas to target recruitment.
- Meeting with hospital administration to take a deeper dive at the beds they do have:
  - Looking into having one hospital in a region serve as a facility with isolation beds so other facilities can open beds.
- Dun Center has 48 open beds and could possibly have an additional 48 open forensic beds by the summer.

### **Agenda Item 7: JCAFS Recommendation Monitoring**

Sheriff Wilson introduced Dr. Jennie Simpson, State Forensic Director, HHSC, who provided members with an introduction to the recommendation tracker.

Highlights of the introduction and committee member discussion included:

- Reporting matrix tracks program initiatives that address JCAFS recommendations from 2020 and will support the implementation of the new Texas strategic plan for diversion, community integration, and forensic services.
- Dr. Simpson provided an overview of the structure of the matrix tracker.

Dr. Simpson introduced Ms. Rebekah Falkner, HHSC, who provided members with a presentation on the NASMHPD Transformation Transfer Initiative 9-8-8 Workforce Grant.

Highlights of the presentation and committee member discussion included:

- National Association of State Mental Health Program Directors offered a grant opportunity to support the 988 roll out and Texas was awarded a grant.
- The project focuses on offering technical assistance and learning collaboratives to the four Lifeline providers: supportive supervision and targeted technical assistance for roll out like text-based services for crisis and other areas that will arise.
- Will also be supporting other LMHAs that will be providing crisis services.
- The project is in the beginning stages.

Dr. Simpson introduced Ms. Valerie Murrieta, HHSC, who provided members with a presentation on the TLETS match for Intellectual Development and Disability (IDD).

Highlights of the presentation and committee member discussion included:

- The 86<sup>th</sup> Legislature allowed for the expansion of TLETS to the local IDD authorities.
- IDD authorities have been able to better engage people who are incarcerated and may have IDD.
- Working on updating the probable match criteria.
- Collaborative workgroup met last year (included LMHAs, LBHAs, LIDDAS, and Texas Council) to review the probable match criteria and develop a less broad set of criteria.
- Final phase of incorporating new criteria and hope to implement this summer.

Dr. Simpson introduced Ms. Veronica Martinez, HHSC, who provided members with a presentation on the Community Mental Health Respite and System Navigator.

Highlights of the presentation and committee member discussion included:

- Systems Navigator program initiative will get \$1.5 million over 24 months. Three programs that will be funded:
  - Utilize to hire dedicated staff position to coordinate and enhance partnerships across the child serving systems.
    - Develop trainings on role of LMHA and deliver to schools, local DFPS case workers, TJJD, and other agencies.
    - Focus on enhancing continuity of care for children exiting crisis or inpatient care.
    - Participate or facilitate staffing for children with high acuity needs.
    - Goal is to help navigate child serving systems and connect children to needed services and diverting children from entering more restrictive settings.

- System Navigator Plus Program: offer all services as System navigator, but also focus will be on enhancing collaboration with DFPS.
  - Role dedicated to providing services for children who are in DFPS conservatorship, lacking placement, or who are at risk of entering into state conservatorship.
- Community Mental Health Program that provided best practice on how to enhance coordination.
  - Integral Care will provide training and a learning collaborative of the best practices they have learned through the Safe Landing program. Training will be provided to System navigator Plus awardees.
- System navigator Program is a competitive procurement (LMHAS and LBHAs were eligible); will be using the Community Mental Health Grant Program to fund the System Navigator Program.
- Funding 2 System Navigator awarded, 3 System Navigator Plus awardees, 1 System navigator awardee that will be doing the training and technical assistance for the other awardees.
- Children’s Crisis Respite Program - \$12 million over 48 months
  - Goal is to support the provision of services and treatment for children in crisis respite facilities with a diagnosis of serious emotional disturbance.
  - Utilizing Community Mental Health Program for funding.
  - Will award 4 programs
- Clarified that navigators will not have a caseload to manage but will do navigation support for direct service providers who do have a caseload.

**Agenda Item 8: Update from the State Forensic Director**

Dr. Jennie Simpson, State Forensic Director, introduced Mr. Matthew Lovitt, and Ms. Catie Bialick, HHSC, who provided members with an update from the State Forensic Office and referenced a PP entitled the same.

Highlights of the update and committee member discussion included:

- Introduction of Matthew Lovitt as the new Senior Policy Advisor.
- The *Texas Strategic Plan for Diversion, Community integration and Forensic Services* will be published soon as a component of the Statewide Behavioral Health Coordinating Council’s *Statewide Behavioral Health Strategic Plan*.
  - Plan focuses on improving forensic services and reducing justice involvement for Texans with mental illness, substance use disorders (SUD), and IDD.
- Sequential Intercept Model (SIM) mapping workshop – tool that details how people with mental illness and SUD issues encounter and process through the justice system.
  - Helps communities identify gaps and resources.
  - Working with rural serving LMHAs to bring stakeholders together to develop actionable plans.
  - Initiative launched in January 2022, have facilitated 3 workshops so far in Bell, Williamson, and Navarro counties. Upcoming mappings scheduled in Hunt, McClennan (regional), Midland, and Tom Green counties.
  - Counties determine which intercepts they want to map.

- Diversion Survey – purpose is to understand challenges experienced by law enforcement when utilizing pre-arrest diversion programs.  
Preliminary findings:
  - 557 unique survey responses (law enforcement).
  - Pre-arrest diversion is a priority;
  - Significant number of respondents identified a crisis response/pre-arrest diversion program that will work with their department and community restoration.
  - Majority respondents aware of crisis services available at LMHAs but many didn't have partnerships.
  - Barriers identified include access to treatment, time it took to connect someone with services, support from treatment providers, prosecutors, individuals who did not want to be diverted, training, some specific to school districts, and resources.
  - Helpful to improve crisis response: additional resources for preventive services, new or expanded MCOT or co-responders, crisis receiving or drop off centers, more law enforcement training, additional resources for law enforcement, more mental health deputies
  - Resources that would be most helpful: majority of respondents felt in person or online training on recognizing and responding to crisis in people with IDD.
- Eliminate the wait – statewide campaign that asks stakeholders to consider what their role is in eliminating the wait for inpatient competency restoration services.
  - HHSC is planning regional forums to review local data, discuss local competency process, identify relevant eliminate the wait strategies, and develop local taskforces and plans to drive change.
- Jail-in reach learning collaborative – monthly technical assistance calls. Goal was to support local forensic teams in actively monitoring their forensic waitlist and identifying opportunities to connect someone to the help they need.
  - Support comprehensive local planning
  - Encourage counties to request forensic services consultations, clinical consultations, and legal education
  - Provide ongoing education
  - Build relationships between counties and HHSC
  - Promote peer learning
  - Open forum for active problem solving and support

**Agenda Item 9: Updates from Health and Specialty Care System (HSCS) Chief of Forensic Medicine**

Sheriff Wilson introduced Dr. Felix Torres, M.D., Chief of Forensic Medicine, HSCS, who provided members with an update from the Chief of Forensic Medicine and referenced a PP entitled the same.

Highlights of the update and committee member discussion included:

- The new Competency to Stand Trial report template has been live since June 2021. Have been extracting data and analyzing trends as of FY 2022. Template revisions have been approved.

- Data on competency restoration process timeframes for discharges (in calendar days): admitted to hospital to order to complete trial competency evaluation is 180 days on average, order being put in by provider to assignment of evaluation is 2 days, assignment of evaluator to performing evaluation is 9 days on average, evaluation performed to report completed is an average 5 days, report completion to report submission to the court takes 7 days, from court submission to discharge of individual back to jail is 15 days.
- Maximum Security Unit (MSU) clinical security review/waiver process – Total 46B commitment represented 95% of commitment orders, the remainder is 46C. There have been 42 waiver considerations at first level, then 34 waiver recommendations, with 34 waivers approved.
- Jail in-reach learning collaborative – committed to improving services for individuals in county jails who have been deemed incompetent to stand trial and are waiting admission to a state hospital.
  - Three additional counties, along with their LMHAs, have joined the collaborative, Collin, Williamson, and Tarrant counties.
  - Providing legal education, clinical consultations, and forensic services.
  - Coming to close of first cohort, second cohort to begin early fall. Preliminarily planning to open to all stakeholder member groups along continuum of care but those who apply will need to have local partners ready to join.
- Forensic Services subcommittee workgroups:
  - Competency Restoration Curriculum Workgroup -
    - 8 module curriculum trainer manual
    - Study guide, undergoing review
    - Living library of educational material and activities, undergoing review
    - Train the trainer workshop is in the planning phase to train how to use the products
    - Target completion date is close of FY 2022 with roll out in first quarter of 2023.
  - Outpatient management Plan Workgroup -
    - Outpatient management plan for NGRI transition to community living was implemented during the first quarter for FY 22.
    - Development of simplified and standardized outpatient management plan for use throughout state hospitals in transition of 46B commitment type to community restoration.
    - Develop process and transition plan required for alternative discharge planning for defendants not likely to restore.
    - Target completion date middle of second quarter of FY 22 with target implementation of fourth quarter of FY 22.
  - Forensic Evaluator Credentialing and Registry Workgroup -
    - Registry running and grandfathered evaluators employed by the state hospital system prior to creation of registry; new hires required to apply for admission to the registry.
    - FY 23 registry renewal season opening during fourth quarter of FY 23.
  - Trial Competency Evaluation Peer Review Workgroup -

- State hospitals will appoint members to the peer review board who will do forensic evaluator peer reviews ahead of the registry renewal opening.
- Forensic Treatment Plan Workgroup -
  - Focus on forensic treatment planning needs.
  - Template for forensically focused treatment plan is being developed and will be presented to the forensic services psych committee for approval.
  - Workgroup report date targeted for end of current quarter, with implementation of the forensic treatment plan for the whole state hospital system beginning of the fourth quarter of FY 22.
- Ad Hoc Group on Maximum Security Into Waiver Process review and revise MSU waiver process.
- Ad Hoc Group on the 46B.1055 Process- Article 1055 allows a court to consider a possible step down to an outpatient treatment program of a defendant under an order of civil commitment for an alleged maximum security level offense who has been transferred from an MSU to a non-MSU after they pass the dangerousness review board.
  - Defendant, head of facility to which defendant is committed, or the attorney representing the state can request notification from inpatient to outpatient of the court
  - Workgroup charge: evaluate how the statutory change could be leveraged to effectuate appropriate discharges into the community for individuals under civil commitment who have passed the Dangerousness Review Board and have stepped down from MSU into non-MSU, ensuring they are served in the least restrictive level of care, and positively impacting the SHS length of stay and waitlist.
  - Deliverables:
    - Recommendations for modifications to current internal processes in accordance with CCP, Article 46B.1055, including, and not limited to, a new or revised operating procedure.
    - Development of an algorithm of the process and the stakeholder collaboration required.
    - Disability Rights Texas invited to participate
    - Target workgroup report is end of fiscal year with implementation shortly thereafter.

### **Agenda Item 10: Public Comment**

Ms. Kayla Cates-Brown read the public comment announcement and coordinated with the ACCO production team and HHSC staff to complete requests for public comment from stakeholders in the public hearing room. No written public comment was submitted to the committee, and no one registered to provide oral comment virtually in the meeting.

Public comment received in person at public hearing room:

- Sonja Burns provided testimony regarding:
  - IST misdemeanor and Long-term residence issues: Ms. Burns stated she attended a meeting where people have to get on a list on the forensic side.



Civil commitments are no longer available. We should dig deeper into this issue.

- When we talk about data, we need to look at the population in the jails and not just the total county population.
- The state hospital system is not aware of the Institution of Mental Disease Exclusion. The current system discriminates against the poor and those on Medicaid. Medicare has a lifetime benefit of 180 days. We should not forget the Intellectual Development and Disabled population.
- Reporting of navigation data and what the outcome is should occur. When people sit in a cage for a very long time the behaviors are different.
- SIM mapping
- Competency Restoration – LMHA and LIDDA's

### **Adjournment Item 11: Adjournment**

Sheriff Wilson provided closing remarks and announced the date for the next JCAFS meeting will be Wednesday, July 20, 2022. Sheriff Wilson introduced Matthew Lovitt, Program Specialist VII, new staff member with the State Forensic office. Mr. Lovitt provided introductory remarks. Sheriff Wilson adjourned the meeting at 12:45 pm. CST.

Below is the link to the archived video of the April 20, 2022 Joint Committee on Access and Forensic Services meeting that can be viewed approximately two years from date of meeting. (To view and listen to the entirety of the meeting and public comment provided click on the link below).

[Joint Committee on Access and Forensic Services Meeting](#)