

# All Texas Access Report

---

**As Required by  
Texas Government Code §531.0222(e)**

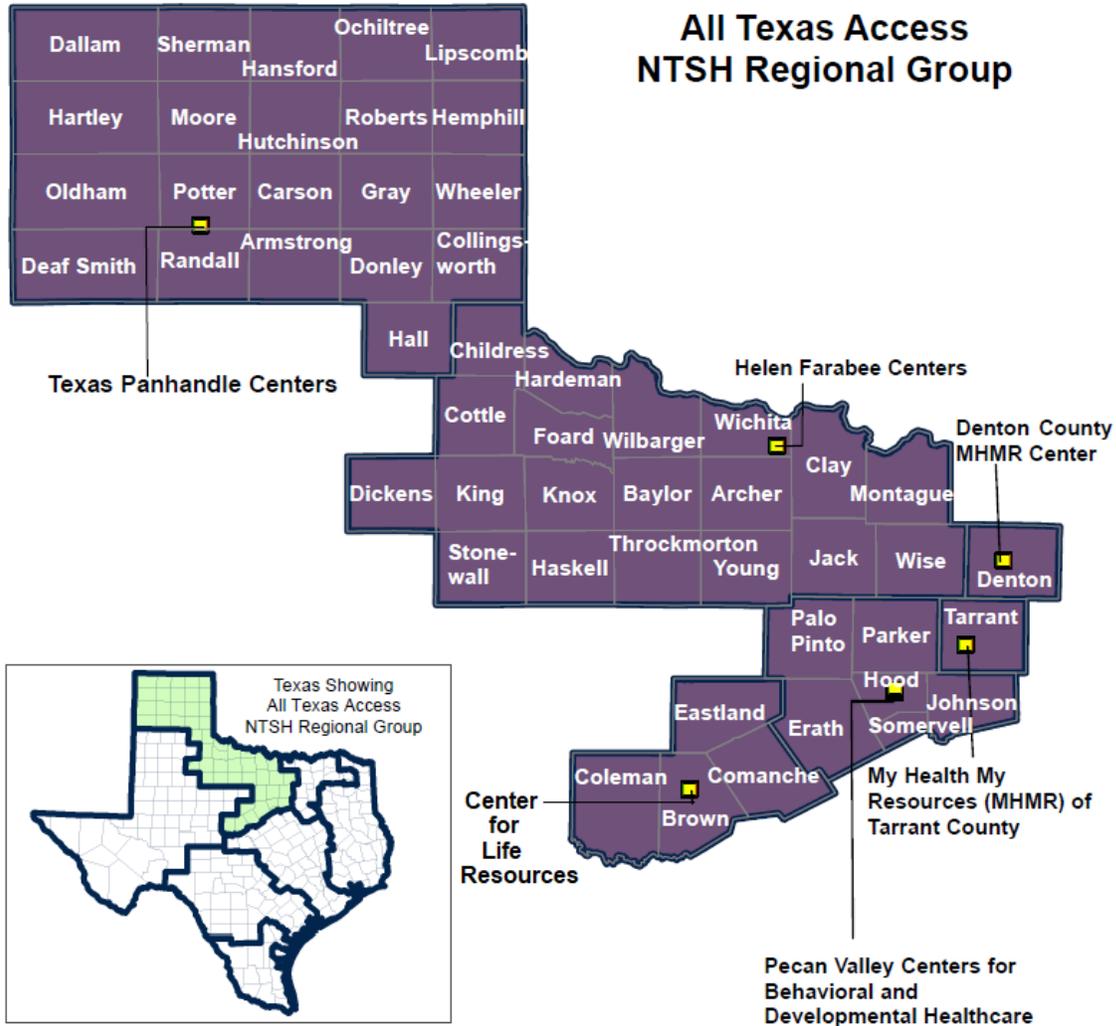
**Texas Health and Human Services  
December 2023**



**TEXAS**  
Health and Human  
Services

# All Texas Access NTSH Regional Group

Figure 32. Map of All Texas Access North Texas State Hospital (NTSH) Regional Group<sup>xxvii</sup>



## Participating LMHAs and LBHAs

- Center for Life Resources
- Helen Farabee Centers
- Pecan Valley Centers for Behavioral & Developmental HealthCare

- Texas Panhandle Centers

The Center for Life Resources participates in both the All Texas Access Austin State Hospital (ASH) and North Texas State Hospital (NTSH) Regional Groups.

Denton County MHMR Center and MHMR of Tarrant County participate in this group as ex-officio members.

## **All Texas Access NTSH Regional Group Plan**

### **Jail Diversion and Community Integration**

#### **Center for Life Resources: Mental Health Deputy**

Center for Life Resources (CFLR) has successfully collaborated with local law enforcement to have at least one Mental Health Deputy in Brown, Coleman, Eastland and Mills counties. Collectively, all Mental Health Deputies served 807 people from February 2022 to February 2023. This success is largely due to the shared vision of community leaders to address the needs of people in the community experiencing mental illness. CFLR has developed contractual agreements with Brown, Coleman, Eastland and Mill county's Sheriff's Offices, and seeks to engage people using the Sequential Intercept Model (SIM). The shared vision focuses on increasing jail diversion, increasing access to appropriate community care, increased access to local resources and reduction in recidivism rates regarding psychiatric hospitalization and local emergency room use.

Due to the program's success, other counties wish to collaborate with CFLR, and CFLR is in the process of expanding Mental Health Deputies through a Bureau of Justice Assistance (BJA) grant in the three counties not currently funded (Comanche, McCulloch and Mills). One of CFLR's local police departments is working with CFLR to receive training and provide additional municipal mental health deputy support. The successful collaborations with local law enforcement have reduced barriers to care, reduced recidivism rates, and decreased emergency department visits as well as psychiatric facility admissions. CFLR has also been able to demonstrate a decreased need for use of force from a law enforcement perspective. CFLR faces some challenges, including finding an electronic health record software that can track all the varied pieces of data being collected. Expansion opportunities have been challenged by lack of applicants in the law enforcement field and lack of sustainable funds to support such activities.

## **Helen Farabee: 911 Integration**

Wichita Falls Police Department approached Helen Farabee about a partnership to address 911 calls related to behavioral health crises. 911 receives approximately 50-70 behavioral health crisis calls monthly, with about 10 of those involving past or current participants in Helen Farabee's services. The long-term goal is to fund a daytime response unit comprised of a police officer, local EMS and a mental health professional who will respond to 911 calls flagged as behavioral health related. Wichita Falls PD has identified a grant to pursue for funding the team. In addition, Helen Farabee has been designated as a behavioral health crisis drop-off point to help with ER diversion. This brings Helen Farabee, Wichita Falls Police Department and local EMS closer to forming a proactive response team.

Helen Farabee has also increased community engagement in Jack and Young counties to help identify jail diversion strategies and to increase access to outpatient and inpatient care. These counties enlisted Helen Farabee's participation in a SIM mapping event to help resolve access issues in rural counties and to divert people into behavioral health care and away from jails when possible.

## **Pecan Valley Centers: Remote Crisis Assessment**

Pecan Valley received a Substance Abuse and Mental Health Services Administration (SAMHSA) grant to strengthen their crisis services by deploying remote crisis assessment throughout their service area. Law enforcement officers were provided with tablet computers as well as the ability to download an app on their work-issued cell phone. When law enforcement is on the scene of a mental health crisis, they can contact Pecan Valley staff through the tablet or app for assistance with crisis assessment and help getting the person connected to appropriate services and supports. The grant started at the end of September 2021. Pecan Valley began providing these services in January 2022, and the grant ran through September 2023. Pecan Valley is successfully partnering with almost every law enforcement entity in their service area.

Pecan Valley's Remote Crisis Assessment Team has streamlined crisis services across their six counties with 357 telehealth crisis risk assessments completed by the MCOT between February 2022 and February 2023. The crisis mental health professional has also completed 33 assessments and consults with law enforcement agencies during this same time frame.

## Texas Panhandle Centers: Crisis Response Team

Texas Panhandle Centers (TPC) participated in two SIM mappings in fiscal year 2023, one for Potter and Randall counties and one for Dallam, Hartley and Moore counties. These two events were well-attended by a wide variety of community partners. The workgroups formed as a result of the mappings are focusing on:

- Developing a diversion center;
- Increasing the mental health presence in 911 dispatch services;
- Data sharing;
- Formation of a leadership team with all stakeholders;
- Improving re-entry programs; and
- Behavioral health training for first responders.

TPC deployed more than 10 tablet computers to law enforcement in Potter and Randall counties for remote crisis assessment and treatment. TPC also added two positions to their MCOT team and one position to their jail diversion program. They have also submitted a JBCR proposal to HHSC for Potter County.

TPC is applying for a SAMSHA grant to create a Family and Youth Wellness Center with a crisis respite component for families who are identified through MCOT or schools as needing ongoing support to avoid the need for hospitalization. TPC recently completed an 18-month report for their SAMHSA Wellness grant. During the first 18 months of the grant, 2,145 people received TPC crisis services. TPC stated that, "One objective of TPC's T-CCBHC wellness program is to keep enrollees out of crisis situations and expensive levels of care. Using NOMs [National Outcomes Measure] data, TPC determined that among program enrollees with both baseline and six-month reassessment data (n = 117), there were 38 fewer nights spent in the hospital for a psychiatric or emotional problem, 11 fewer ER visits for a psychiatric or emotional problem, 21 fewer nights spent homeless, and only a slight increase of three additional nights in jail during the 30 days prior to reassessment compared to the 30 days prior to baseline (Objective 3.7)."

TPC has also increased on-demand prescribers and purchased 30 tablet computers for jails, first responders, and hospitals to access mental health services remotely. The tablets are the main source of contact between TPC and both ERs and jails and create quicker, safer access to assessments and MCOT services. TPC will work with first responders on the best use of the tablets for them. In addition, TPC is working

with Potter County, Randall County, and Amarillo law enforcement to discuss getting mental health assessment services incorporated into 911 dispatch. TPC is also collaborating with community partners on the design for a diversion center.

## **Timely Access**

### **Collaborate on Residential Treatment Centers for Children**

The LMHAs in this regional group collaborate with local community partners like Community Resource Coordination Groups and juvenile probation to serve children in their services area, but crisis and acute options for children are still a challenge. TPC was awarded funding from Center for Mental Health Services 2023 CCBHC Improvement and Advancement Grant for a 16-bed youth and family respite program. These short-term respite services will also be tailored to the family's needs promoting the use of natural supports and home like placements whenever available.

### **Increase Integrated or Co-Located Services**

Through a SAMHSA grant, Pecan Valley Centers started a primary care program integrated into their Johnson County mental health clinic, including a shared electronic health record. The program serves adults from Pecan Valley Center's entire service area and focuses on high blood pressure, diabetes, and high cholesterol. The grant funds all staff for the program as well as medications for participants. Pecan Valley Centers intends to use this program as a bridge while helping people obtain medication assistance or benefits if they have no funding source. The grant funded remodeling, equipment, medical supplies, and a primary care team. Pecan Valley served 435 people in this program from February 2022 to February 2023 and hopes to expand the program to more medical concerns.

Pecan Valley's MCOT team is also co-located in three of six county jails. This allows them to continue developing relationships with local law enforcement and easily assess those that may need a crisis intervention while in jail or about to bond out.

TPC started partnering with local health clinics through multiple funding sources and continues to explore options for more readily accessible physical health services. They have an MOU with most rural healthcare clinics in their service area and meet quarterly with the clinics to discuss partnership opportunities. TPC contracts with a Federally Qualified Health Center (FQHC) for basic physical health care treatment as well as a community urgent care facility. TPC moved several

programs into the same location as the FQHC this year, and they are considering adding more services at that location. TPC has also contracted with West Texas A&M University to fund eight hours per month of psychiatric time for students in need of this service. This service is co-located in the student health clinic. West Texas A&M University counselors work with the case managers at TPC to provide counseling and psychosocial rehabilitation services to assist students in their recovery.

## **Increase Competency Restoration Program**

Due to low referrals, both Pecan Valley and CFLR have converted either part or all of the OCR contract funds to JBCR.

Various factors have led to a relatively low percentage of people being referred to qualify for OCR. Those factors include violent or other higher risk crimes, lack of adequate secondary support for the person to be released to outpatient care, or the court not permitting a person to be released from jail on bond due to concerns of re-offense. For CFLR, 77 percent of people referred to OCR have been screened out based on these factors. By adding JBCR services, CFLR can reduce some of these exclusions and serve more people.

## **Increase Transportation for Routine LMHA or LBHA Services**

Through the same SAMHSA grant mentioned above, Pecan Valley Centers funded four drivers and vehicles to provide transportation to LMHA participants across four out of five clinics. Additionally, people can use this service to access primary care at the Cleburne Clinic. Pecan Valley assisted 593 people with transportation services from February 2022 to February 2023.

Through funding from SAMHSA, TPC added a new mobile wellness clinic that travels to the twenty-one counties in the Texas Panhandle to provide mental health, substance use, and physical health care services. The program strives to serve people and their families by providing specialized care in their own community. The team being mobile has met a significant need in the rural and frontier counties. Many people would go without services and medication because of the many challenges they face, such as chronic health issues, lack of transportation, and severe mental illness. Being able to go out and meet them where they are and providing all services in their home or current location, has been a great support to people and their families.

For TPC, one focus group out of the recent rural SIM is dedicated to transportation services. The group identified this as a need due to the bulk of care being located in Amarillo. The cost of gas and lack of transportation services is a barrier to overall health and support needs.

## **Step-Down Program**

From February 2022 to February 2023, four people were admitted to Helen Farabee's step-down program. The program has added exercise and recreational options, such as basketball, gym memberships, a garden, and transportation to community activities. All the residents receive assistance with their medical needs, which have included hospital visits, lab work, hearing tests, hearing aids, dental work, dentures, and primary care physician visits.

## **Crisis Services**

### **Expand Crisis Services**

Helen Farabee Centers received COVID-related MCOT expansion funds from HHSC used to purchase iPads for remote crisis assessment. Helen Farabee remains responsive to community needs which suggest in-person crisis response is preferred over phone/video services. They continue to use remote services when requested, and this remains an integral part of their eligibility determinations and prescriber services. Workplace shortages are improving through increased hiring over the past few months.

Through the same SAMHSA Community Mental Health Grant previously mentioned, Pecan Valley Centers purchased tablets, cases, and car chargers for law enforcement to use during mental health crisis events. The project is called Remote Crisis Assessment Team. Most law enforcement agencies in their service area have taken at least one tablet or have downloaded the app. Response times to obtain a crisis assessment can be decreased versus waiting for staff to drive to the location to conduct an assessment. This allows law enforcement to return to their patrol routes much faster. Additionally, staff appreciate being able to see the person they are assessing rather than conducting the assessment via telephone. Pecan Valley Centers is also collaborating with fire departments and EMS in select counties to reduce unnecessary transports to ERs or jail.

TPC is part of a community "Mental Health Think Tank" that is exploring the idea of an Extended Observation Unit. TPC will use their crisis respite facility as a resource

in the program. They are also in the process of expanding mental health services within the jail in Deaf Smith County.

## **Workforce**

### **Support the LMHA and LBHA Workforce**

Using grant funds, Pecan Valley is hosting monthly team-building activities at each clinic location. They also purchase light snacks for staff to have while they are working. This has enabled field team members to grab a snack and drink before leaving the clinic for the day. Office-based team members can access the snacks at any time during the day. Staff have voiced that they are very appreciative of this. Pecan Valley also continues to use the Calm app for all staff. Additionally, through the Calm for business tools, they use email templates to send staff information about series that may be helpful for stress reduction, improved sleep, or anxiety reduction. This series can be in-depth or as simple as a one minute guided meditation. Staff report using these tools to improve their sleep and mindfulness practices. Grant funds also enabled a contract with a local yoga studio owner. Pecan Valley staff received a reduced monthly rate for unlimited yoga classes for the remainder of the grant, which ended September 2023.

TPC increased wages for key direct care staff – Qualified Mental Health Professionals (QMHP) and staff who were making under \$15.00 an hour – and increased salaries overall for staff working at the Center. They have increased their presence at job recruiting events and on social network platforms. TPC has also increased presentations to universities and colleges that have social service fields and developed shadowing programs for student nurses entering the two-year and four-year Licensed Practical Nurse and Registered Nurse (RN) programs. Two additional days of paid time off, have been added to the agency benefit plan. TPC also added one percent to the current agency match for each staff participating in the retirement plan. A referral reward has been created so when a current staff refers someone to work at TPC and the person is hired, the staff making the referral is given a cash award when the person starts New Employee Orientation and six months after employment. A retention bonus is being developed to incentivize employees to stay longer at the agency.

## **Increase Use of Peer Support Specialists**

Helen Farabee participated in the Peer Support Learning Collaborative in fiscal year 2023. Please refer to the Introduction for more information about the Peer Support Learning Collaborative.

Pecan Valley Centers routinely uses peer support specialists. Grant funds allowed Pecan Valley Centers to hire two part-time Recovery Peer Support Specialists. Both Recovery Peers are finishing their training and will support people recovering from substance use. Three Peer Support Specialists participated in training to become Wellness Recovery Action Plan (WRAP) Facilitators and held a WRAP group. One Peer Support Specialist attended a national peer conference. The Assisted Outpatient Treatment and Coordinated Specialty Care programs also have dedicated peer support specialists, with specific lived experience that informs their work with the people participating in those programs.

TPC added four peer positions in two SAMHSA grant-funded programs this past year. An additional three have been added, two identified as recovery support peers and one specific to mental health. TPC has added a peer to the intake process to help engage and support people who are new to the agency. In total, they have 10 peers: six mental health, three substance use, and one Family Partner. They hope to add a peer to a rural area.

TPC recently certified a peer to be a tobacco cessation trainer. Plans to certify another peer are in the works. Classes will be held in clinics throughout the Panhandle. The Wellness Team funded by TPC's Texas Certified Community Behavioral Health Clinic (T-CCBHC) expansion grant have conducted various outreach and educational events in rural and frontier areas. This team combines an Advanced Practice Registered Nurse, RN, QMHPs and Peers who travel to the person's home for service delivery. Approximately 450 people will be served in this program. This type of service delivery is starting to be replicated in TPC's other programs. TPC is also applying for a T-CCBHC Improvement and Advancement grant to help create a comprehensive family and youth mindfulness clinic. The aim is to reduce crisis episodes for youth and families who might need hospitalization if not treated. This program will take referrals from the MCOT team, schools, and other community service providers. The grant will also have a crisis respite component for youth.

## Housing

### Develop Adult Residential Settings

TPC is increasing the census in their Crisis Respite program and has increased programming in their Respite Center.

### Texas Certified Community Behavioral Health Clinics Updates

Helen Farabee continues to maintain basic medical and behavioral health integration by having a Care Coordination team respond to people with elevated values on key medical screenings. These teams identify people, complete care coordination assessments, and help to link them to primary care providers.

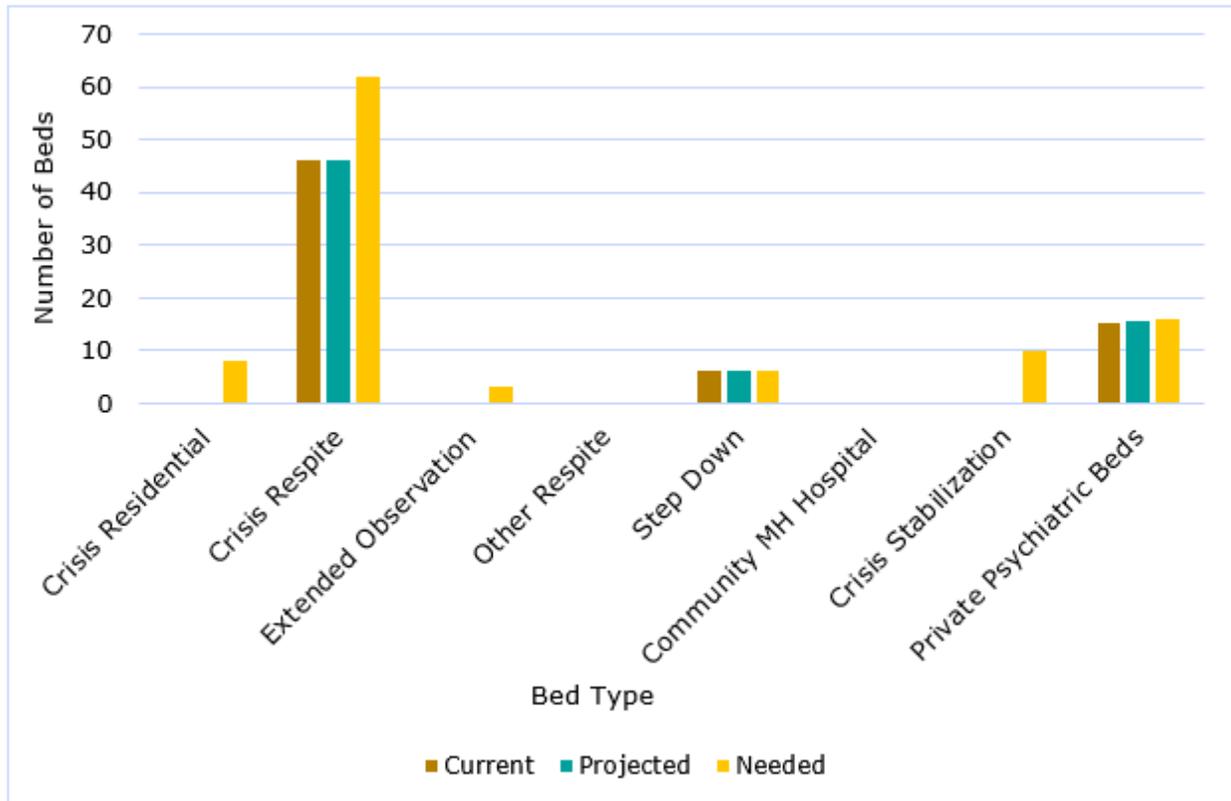
Pecan Valley established a primary care program in their Cleburne Clinic that is accessible for all adults in services throughout the region. They served 435 people in the clinic from February 2022 to February 2023.

TPC's Wellness program, funded through a T-CCBHC expansion grant, has produced positive outcome. For example, people with elevated body mass index scores experienced a statistically significant reduction after six months of engagement, and people with elevated blood pressure achieved a statistically significant reduction in average systolic blood pressure (143 at baseline to 131 at reassessment) and diastolic blood pressure (93 to 87).

### Estimates: Number of Inpatient and Outpatient Beds

Each rural-serving LMHA or LBHA in the regional group submitted information about the outpatient and inpatient beds currently available to them and projected changes over the next two years. LMHAs and LBHAs also reported how many beds they need in order to adequately serve their community. Refer to the [All Texas Access Implementation](#) section of the report for additional explanation of the chart below.

**Figure 33. All Texas Access NTSH Regional Group Bed Capacity<sup>xxviii</sup>**



**Table 27. All Texas Access NTSH Regional Group Bed Capacity**

	<b>Current Number of Beds</b>	<b>Number of Beds Projected in Two Years</b>	<b>Number of Beds Needed in Two Years</b>
<b>Crisis Residential</b>	0	0	8
<b>Crisis Respite</b>	46	46	62
<b>Extended Observation</b>	0	0	3
<b>Other Respite</b>	0	0	0
<b>Step Down</b>	6	6	6
<b>Community MH Hospital</b>	0	0	0
<b>Crisis Stabilization</b>	0	0	10
<b>Private Psychiatric Beds</b>	15.3	15.6	16