

All Texas Access Report

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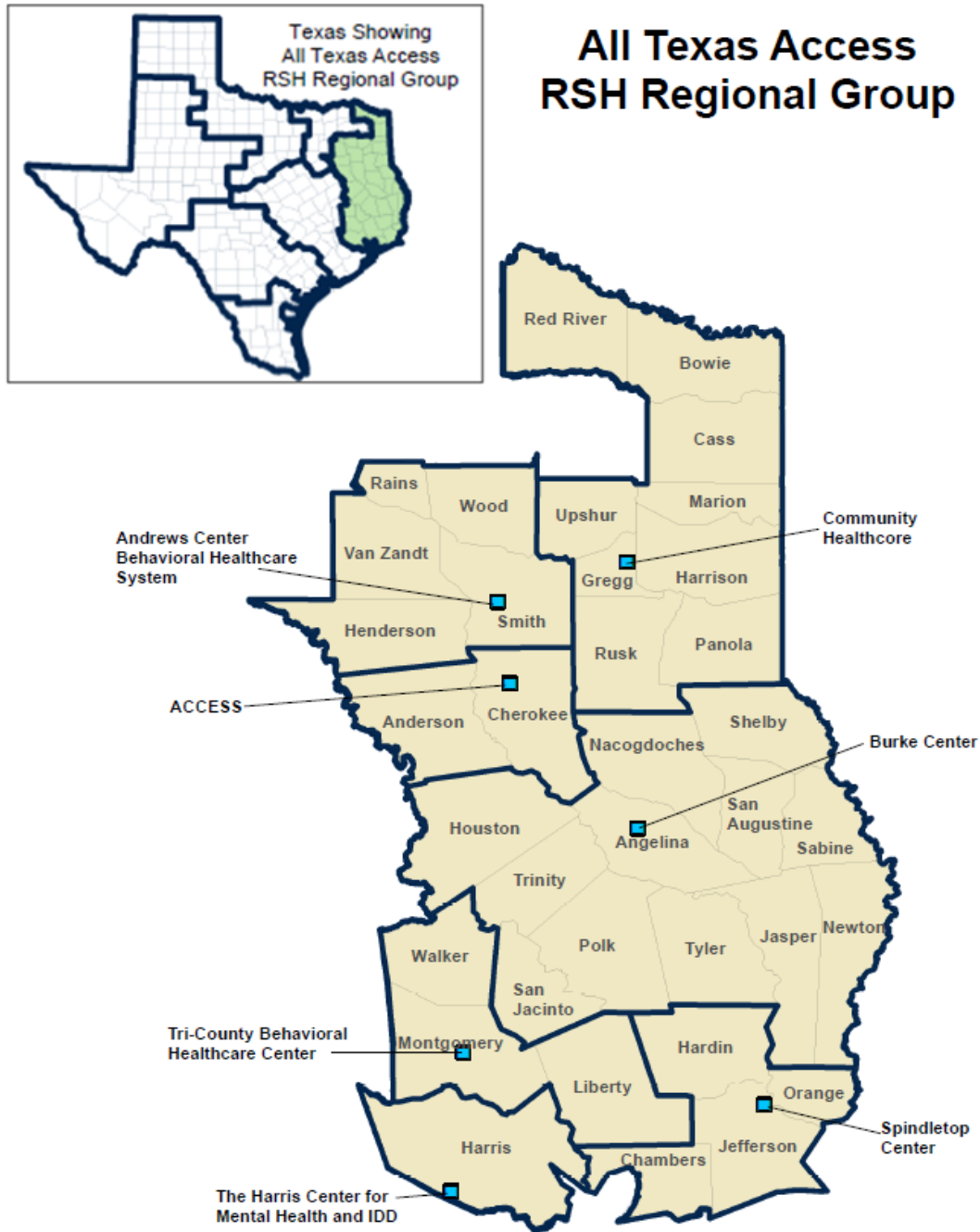
**Texas Health and Human Services
December 2023**



TEXAS
Health and Human
Services

All Texas Access RSH Regional Group

Figure 36. Map of All Texas Access Rusk State Hospital (RSH) Regional Group^{xxx}



Participating LMHAs and LBHAs

- ACCESS
- Andrews Center Behavioral Healthcare System
- Burke Center
- Community Healthcore
- Spindletop Center
- Tri-County Behavioral Healthcare

The Harris Center for Mental Health and IDD, headquartered in Houston, participates in the Rusk State Hospital (RSH) regional group as an ex-officio member.

All Texas Access RSH Regional Plan

Jail Diversion and Community Integration

ACCESS: Mental Health Deputy Support

ACCESS continues to have two Mental Health Deputies. However, the Cherokee County position was vacant for several months due to the deputy leaving the sheriff's office and difficulty finding eligible officers. The loss of support to crisis staff has been a challenge, but ACCESS used lapsed salary dollars to pay off-duty law enforcement officers to provide transportation to inpatient facilities. The transport is being coordinated through the sheriff's office and has worked well.

Andrews Center: Co-Responder Program

The Behavioral Health Leadership Team in Smith County has plans for a diversion center. Andrews Center, as well as other community partners, are supporting the Behavioral Health Leadership Team in researching best practices and seeking funding for the center. In the meantime, Andrews Center has co-located MCOTs in the Smith County jail and the local psychiatric hospital.

Spindletop Center: Co-Responder Program

Spindletop would like to expand their Assistance, Stabilization and Prevention (ASAP) program, which pairs a Spindletop staff person with a law enforcement officer to respond to mental health crisis calls. Spindletop currently partners with

the Orange County Sheriff's Office and the Jefferson County Sheriff's Office, but the program provides more requests than the current staff can manage. Spindletop has not yet identified a funding source for this need.

Burke: Rural Crisis Response and Diversion - Drop Off Center

Burke has increased jail diversion through Rural Crisis Response and Diversion grant funds. Law enforcement has a direct line to Burke's diversion team, and law enforcement has been very supportive and excited about this resource. Burke has experienced an increase in direct calls to the diversion team from both law enforcement and emergency rooms. Burke's Law Enforcement Liaison has conducted multiple trainings with law enforcement, which has been well-received. Law enforcement has even started referring people they feel need additional training and support around mental health.

Emergency rooms are now contacting Burke more and law enforcement less. Law enforcement is also contacting Burke more often in the field, which results in decreased need for law enforcement to transport people to emergency rooms. Burke has increased availability of the diversion team after business hours and feels fortunate to have a crisis stabilization unit to use as part of jail diversion when appropriate.

Tri-County Behavioral Healthcare: Rural Crisis Response and Diversion - Drop Off Center

Tri-County secured local funding to reopen their Crisis Stabilization Unit through the end of 2024. Tri-County continues to provide crisis screening and assessment located in the front of the Psychiatric Emergency Treatment Center (PETC). Staff have conducted over 3,100 crisis resolution services at the PETC, and when including those screened and assessed through other means this number is significantly higher.

Community Healthcare: Non-Medical Drivers of Health

Community Healthcare is fostering recovery by refocusing care delivery on non-medical drivers of health (NMDOH) and abating the impact of trauma. Community Healthcare uses a NMDOH assessment with each new person at intake. Identified NMDOH needs are referred to the care coordination program. Between February 1, 2022, and February 28, 2023, Community Healthcare performed 3,227 NMDOH

assessments and screens all people for NMDOH needs using a tool in their electronic health record.

All people screened who identify an NMDOH need and want assistance are referred to the care coordination team. This team is comprised of nurses, caseworkers, and peers. The team has successfully connected people to housing, new eyeglasses, assistance with transportation, prescriptions, and medical and dental care. Peers have brought food boxes to people and showed them how to access resources for their food needs. Community Healthcore has also been able to move people out of unsafe living arrangements.

Collaboration

Increase Integrated or Co-Located Services

ACCESS partners with school districts and FQHCs, including co-locating with a FQHC. ACCESS has MOUs with all school districts in their service area. ACCESS is working with local FQHCs on processes for warm handoffs and crisis screenings.

Andrews Center collaborations continue to improve, particularly related to jail diversion. For example, they now have jail diversion at an office inside the Smith County jail where they meet with people prior to booking. They also have MCOT housed in the UT North Hospital.

Burke continues to meet quarterly with community partners in each county to collaborate.

Community Healthcore now has five outpatient sites licensed to provide youth substance use services using LCDCs. Community Healthcore has provided MAT since February 2019 and ambulatory detox since September 2021. These services are available at two outpatient clinic sites in Longview and Texarkana.

To help alleviate workforce shortages, Community Healthcore started a Behavioral Health Intern Academy through a SAMHSA grant. This Academy is for university students in their final year of a human services degree. Community Healthcore has been able to hire some of these students upon their graduation.

Spindletop is developing more care coordination MOUs with referral partners of all types in their area.

Tri-County continues to have success through their involvement with the Montgomery County veterans jail dorm where veterans receive peer support and counseling. Tri-County continues to participate in many other community collaborations where key community partners work to find solutions and fill gaps for people with behavioral health needs (e.g., medical, behavioral health, law enforcement, criminal justice, and other community agencies). A few such collaboratives include the Montgomery County Behavioral Health and Suicide Prevention Taskforce, Montgomery County Crisis Collaborative meeting, and Liberty County Community Stakeholder meeting. Additionally, Tri-County collaborates with community partners in Walker County, including Sam Houston State University, criminal justice partners, and other agencies, to address the need for a Crisis Intervention Response Team (CIRT) in Walker County. This collaboration is still in the initial stages and has not officially been named.

Strengthen Collaborations with Public Schools

ACCESS has MOUs with all school districts in their area. Burke has established on-site psychiatric services with a local school district. This project provides psychiatric care through telemedicine, allowing families to minimize the burden of taking off work, traveling, and adding personal expense to office-based visits. Burke would like to emulate this program in other districts, but currently does not have a funding source to do so. Burke has also established a relationship with Angelina College, a local community college. This unfunded project provides a mental health professional as needed to answer questions from students and staff. Intake services and therapy can be provided all from the campus.

Andrews Center reports that Mental Health First Aid has been expanded to rural schools within Texas' Education Region 7. They are hopeful that this development will reduce the stigma associated with having a mental illness and building trust and relationships in very rural areas. Andrews Center also continues to provide psychiatric services via tele-video to children in their rural counties.

Community Healthcore reports that increased public school collaboration is a specific goal for their service area. One collaboration is through an MOU with Tatum ISD. Through this agreement, Community Healthcore recently placed a mental health professional on the school campus to address student and faculty needs. Community Healthcore plans to expand this model to other school districts after demonstrating the benefit.

Spindletop is co-locating services in Hardin Jefferson ISD and Nederland ISD and operating grant programs in Vidor ISD and Bridge City ISD. They are working on a potential collaboration with Goose Creek ISD and a Federally Qualified Health Center (FQHC) in Chambers County.

Tri-County continues to partner with several schools in their service area and now has six school-based clinics with staff co-located inside the schools. Most recently, through a SAMHSA grant, they were able to begin a new school-based clinic in Cleveland, Texas.

Increase or Strengthen Hospital Collaborations

In 2022, Andrews Center developed a transition of care model for people discharging from private psychiatric hospitals. The model has been successful ensuring people receive an uninterrupted provision of services. Due to the model's success, in 2023 Andrews Center implemented care navigation for uninsured people hospitalized in contracted inpatient beds to ensure extra support during and following hospital discharge. These services indicate continued progress for people served and strengthened relationships with psychiatric hospitals.

Burke continues to meet quarterly with all interested stakeholders and valued community members. These consistent meetings maintain a strong alliance set in place over a decade ago.

Tri-County has regular meetings with law enforcement, hospitals, private psychiatric hospitals, and other stakeholders. The meetings are productive in coordinating care and resolving local challenges.

Community Healthcore has maintained regular meetings with hospital partners and has increased nursing triage staff embedded in CHRISTUS St. Michael in Texarkana.

Crisis Services

Increase Mental Health Deputies

ACCESS reports that with no additional funding for Mental Health Deputies, they have instead been discussing finding ways to reduce Mental Health Deputy transportation responsibilities to allow them to focus more on crisis intervention.

Burke has no Mental Health Deputies. Burke has seen an increase in the severity of crisis incidents, and it is common that the crisis is too severe for referral to their

crisis stabilization unit. However, finding private psychiatric beds is challenging, as local hospitals have reduced capacity due to staff shortages.

Effective April 2, 2023, Community Healthcore closed their Extended Observation Unit/Residential Crisis Unit in Atlanta, Texas, due to workforce shortages. The goal is to attract new workers to properly staff the facility. Fortunately, their MCOT remains well-staffed with little turnover.

Tri-County operates two CIRTs, which are law enforcement/clinician teams typically available daily from 11:00am – 11:00pm to respond to crisis situations in Conroe. The Montgomery County Sherriff's Office was recently awarded a grant to operate two additional CIRT teams for which Tri-County has provided the clinicians. These teams, in addition to a partnership for a similar team through the Montgomery County Constable's Office funded by SAMHSA, have expanded this specialized service significantly in Montgomery County. Walker County is in preliminary discussions with the goal of developing a CIRT team in that area as well.

Texas Certified Community Behavioral Health Clinic Updates

ACCESS partners with local FQHCs, including co-locating with an FQHC. ACCESS is working with local FQHCs on processes for warm handoffs and crisis screenings.

Andrews Center continues to use co-located, integrated health services. They are also developing care coordination agreements with local FQHCs.

Burke continues to have a care coordination program to work with people who receive both mental health and primary care. They were recently re-certified as a T-CCHBC. Burke is working to expand child psychiatric services in Houston County, expanding children's services and adding additional service hours in Tyler County, and opening a satellite clinic in Newton County.

Community Healthcore participated in the General Health Integration Learning Collaborative through the National Council for Mental Wellbeing from July 2021 through July 2022 and continues to partner in the learning collaborative through an Extension for Community Healthcare Outcomes project. Community Healthcore has improved performance outcomes in key areas including screening for drug and alcohol use, depression screenings, and laboratory testing for people experiencing schizophrenia. To serve all people with a behavioral health condition, Community

Healthcore provides psychiatry services to people not requiring a high level of treatment through primary care services.

Spindletop has implemented a new electronic health record system, which they expect to help in care coordination and monitoring of key health outcomes.

Tri-County continues to run an integrated health clinic for people participating in their services, currently through SAMHSA grant funding. This program assists Tri-County with identifying and treating common co-occurring health conditions for people who may otherwise not receive care. Through SAMHSA grant funding, Tri-County has also developed an Enhanced Care Coordination Team (in addition to care coordination provided by staff) that accepts referrals from both staff and through their risk stratification process to provide additional support and coordination for people with complex needs. As a part of addressing whole person care, Tri-County has also launched a MAT program.

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 to adequately serve their community. Refer to the [All Texas Access Implementation](#) section of the report for additional explanation of the chart below.

Figure 37. All Texas Access RSH Regional Group Bed Capacity

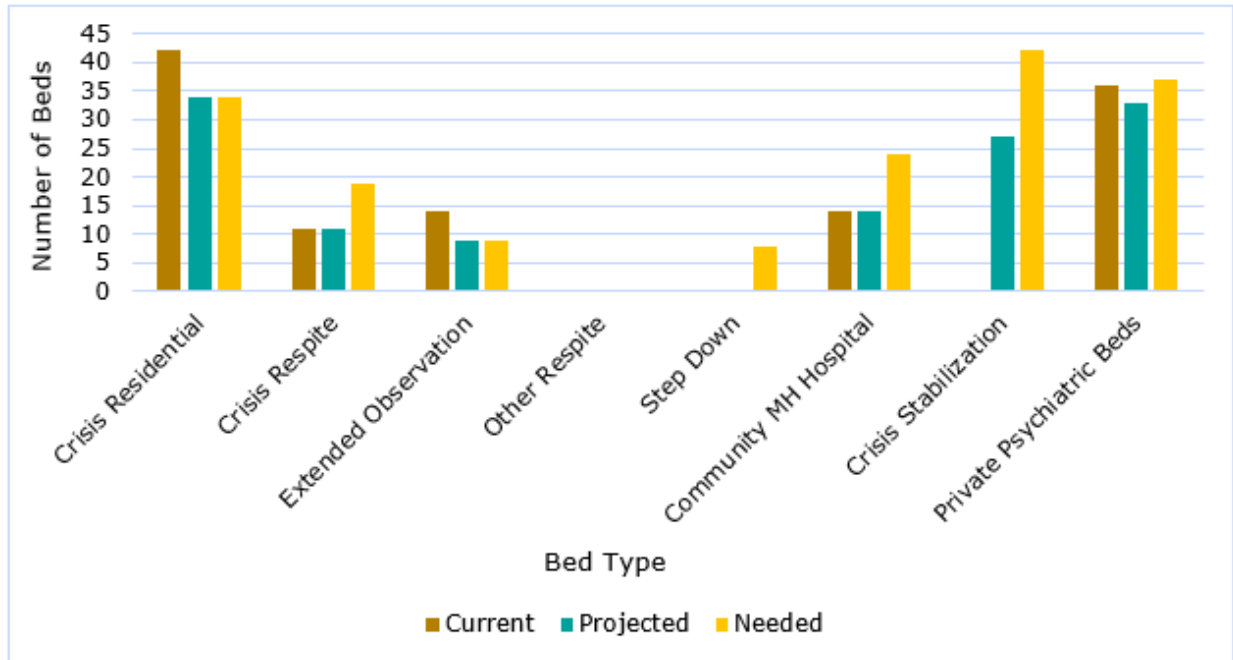


Table 29. All Texas Access RSH Regional Group Bed Capacity

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