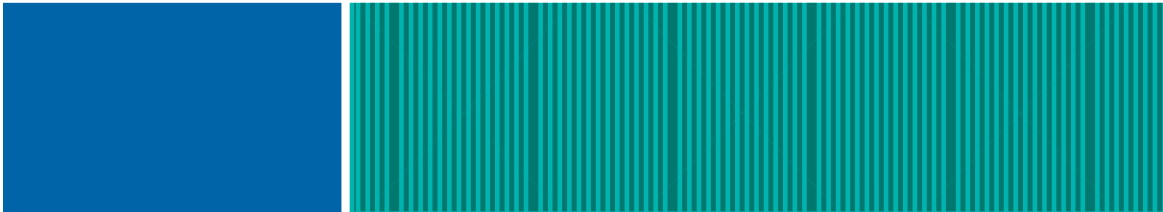


CHILDREN'S MENTAL HEALTH

Residential Treatment Center Project

JUNE 2024



TEXAS
Health and Human
Services

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If You Need Immediate Help

Safety is a Priority: Call 9-1-1

Call 9-1-1 if a crisis becomes unmanageable and your child could hurt themselves or someone else. Many communities have social workers or police officers trained to handle mental health crises. Let the emergency responder know that your child has a serious emotional disturbance and provide any facts about your family's preferences for treatment and support.

Crisis Services

If your child has a crisis and you need support to help them, your local mental health authority (LMHA) or local behavioral health authority (LBHA) can provide emergency crisis services.

To find your LMHA or LBHA call 2-1-1 or visit:

[Find Your Local Mental Health or Behavioral Health Authority](#)

My LMHA or LBHA is:

Crisis Line:

Other Important Numbers:

Crisis Text Line:

Text **HOME** to **741741** for free, 24/7 crisis counseling.

Background

Before 2013, families might take part in mental health services for years, across many child-serving agencies or programs, but still need extra help to meet their child’s mental health needs. Some families made the hard decision to give up their parental rights so their child could receive intensive care in a residential treatment center (RTC) through the Department of Family and Protective Services (DFPS). That process is referred to as relinquishment of parental conservatorship. These challenges changed with Texas Family Code Chapter 262 being amended by Senate Bill (S.B.) 44, 83rd Legislature, Regular Session, 2013.

In accordance with S.B. 44, DFPS and the Health and Human Services Commission (HHSC)—in partnership with The University of Texas at Austin—studied the challenges and barriers Texas families face when supporting their child with a serious emotional disturbance (SED). Their work resulted in the creation of the Children’s Mental Health Residential Treatment Center (RTC) Project —known as the RTC Project.

The RTC Project is a partnership between DFPS and HHSC to provide treatment support for families with a child who may be placed into DFPS conservatorship because of their mental health care needs.

Overview

This guide includes factual information to help a family make the best decisions for their child and family. This guide walks through each step of the residential placement process and provides facts about:

- How to access services through the Children’s Mental Health RTC Project;
- What to expect from a child’s treatment;
- Services available such as family therapy, support groups, and other help;
- Knowing a person’s rights and responsibilities; and
- Supporting a child in transitioning back home.

What is an RTC

An RTC provides therapeutic and residential treatment for children to address needs such as mental illness and substance use or other behavioral problems. Children stay in an RTC for a short period of time receiving continuous monitoring and supervision as they work to meet their therapeutic goals. RTCs are clinically focused and offer therapeutic services for children—such as individual and group therapy—while supporting them to implement the skills learned in therapy. Families also take part in family therapy and work to build on their skills to better support their child.

Children who receive services through an RTC have tried other outpatient services and are unable to be supported at home or in their community because of the severity of their mental health needs or other safety concerns. Residential treatment services can provide time and space for families and their children to heal and rebuild.

What is the Children's Mental Health RTC Project and Who is Eligible?

The Children's Mental Health RTC Project provides support for families with a child who has exhausted their local mental health service options and might require placement into DFPS conservatorship.

Eligibility requirements:

- The child is a resident of Texas.
- The child is younger than 18 years of age.
- The child has a qualifying serious emotional disturbance.
- There is no current abuse or neglect in the household (an open investigation with DFPS).
- The family may be placing their child into DFPS conservatorship because of the seriousness of their child's mental health needs.
- The family will support the mental health needs of the child throughout the RTC Project treatment process.

How Can I Get Help Through the RTC Project?

You can be referred to the RTC Project through your LMHA or LBHA or DFPS.

What is an LMHA or LBHA?

An **LMHA** or **LBHA**, also referred to as a community mental health center, provides a range of mental health services for people and families.

- **Learn more at:** [Community Mental Health Services](#)

Asking for a Referral through an LMHA or LBHA

Call your child's LMHA or LBHA to ask for a referral to the RTC Project. Your LMHA or LBHA will send your referral directly to HHSC.

Request a Referral through DFPS

If your family has an open case with DFPS, you can ask your DFPS caseworker for assistance with the referral.

Determining Eligibility

After a child is referred to the RTC Project, your LMHA or LBHA will schedule a meeting with you and your child. This meeting is to learn more about your child's mental health needs using a tool called the Child and Adolescent Needs and Strengths (CANS) Assessment. The LMHA or LBHA reviews the CANS Assessment to see if child is eligible for the RTC Project.

LMHA or LBHA Intake Assessment

Your LMHA or LBHA will schedule a time to meet with you and your child for an assessment. If this is your first visit, or if you have had a long break in services, bring the following items to your intake:

- Valid photo ID;
- Proof of income, such as your most current pay stub;

- Most current insurance card, if applicable;
- Proof of residence for the last 30 days, such as a utility bill or rental agreement;
- Name, address, and phone number of any doctor or helping professional who has treated your child;
- A list of your child’s medication;
- A list of dates of any psychiatric hospitalizations;
- Any legal court document that places the child in your conservatorship, if applicable.

Call the intake office before your visit to ask about the documents you will need. Confirm the date and time of your visit and ask for important facts, such as directions to get to the clinic.

This first meeting can be long, but you can ask to adjust the pace of the assessment for your child’s needs. Even though the CANS Assessment includes topics that might be hard to talk about, it is important to discuss them—the information will help the LMHA or LBHA know how to best support your child. Any information you share will be kept confidential within the limits of the law.

If your child’s assessment indicates they need placement in an RTC and a placement is not ready immediately, the LMHA or LBHA will help by connecting you to more supports, such as the local Community Resource Coordination Group (CRCG), where available. The LMHA or LBHA will refer your child to mental health services at the LMHA or LBHA, including the Youth Empowerment Services (YES) Waiver. The LMHA or LBHA will also invite you to be involved in certified family partner (CFP) services. CFP services connect you to a trained person with first-hand experience as a primary caregiver of a child with a mental health diagnosis. Your CFP will help make sure your family’s thoughts and opinions are heard. A CFP helps advocate on behalf of your child. Finally, your DFPS caseworker can help you find other community supports.

What is a CRCG?

Community Resource Coordination Groups help people with complex needs that cannot be met by a single agency. They connect people and families with public and private agencies to get the help.

- **Learn more at:** [Community Resource Coordination Groups](#)

What is the YES Waiver?

The **YES Waiver** helps children with serious mental, emotional, and behavioral difficulties. The YES Waiver provides intensive services delivered within a strengths-based team planning process called Wraparound. Wraparound builds on family and community support and uses YES services to help build the family's natural support network and connection with their community.

- **Learn more at:** [YES Waiver](#)

Application Packet

To find the best match among available RTC placements, a child needs an application packet. The application packet includes the child's:

- CANS assessment;
- Psychological evaluation; and
- RTC application for placement.

A child must have a current (within the past 12 months) psychological evaluation. A psychological evaluation is a comprehensive assessment done by a psychologist to identify your child's current mental health needs, intellectual functioning, and developmental delays. A child's treatment team uses the evaluation to decide the best plan for treatment. If a child does not have a current psychological evaluation, you should plan to spend one or more full or partial days to get a new one. Your health insurance plan may cover the cost of the psychological evaluation.

A child will also need an RTC application for placement. The application for placement includes questions about a child's educational, medical, and placement history, so it is helpful to have that information readily available before you begin. RTCs use the application for placement to help determine if they can support a child.

The application packet can take time to put together, but your DFPS caseworker and LMHA or LBHA case manager will support you through this process. With help, many families can finish the application packet within 30 days.

If you have asked for help but your DFPS caseworker or LMHA or LBHA case manager is not meeting your needs, email the RTC Project at RTCproject@hhs.texas.gov.

Finding an RTC Placement

HHSC will share a child's completed application packet with RTCs that can meet your child's treatment needs. Many RTCs have specialized training to work with special populations. For example, some RTCs only work with teenage boys with aggression, while others specialize in youth with eating disorders.

Distance from your family's home is another consideration of RTC placement. Many RTCs recommend family visitation either on campus or at home, so it is important to find a place as close to home as possible.

Some RTCs will schedule an interview before admission to learn more about a child and family. If needed, the facility will call you to schedule a time to meet. Most families find it helpful to prepare a list of questions ahead of time and allow up to an hour for the meeting or call. Even if the RTC does not need an interview, HHSC recommends talking to the admission team to make sure the RTC is a good fit for your child.

Finding the best RTC for your child requires matching their individual treatment needs to the therapeutic strengths and specializations of the RTC facility. Stay involved in deciding where your child will receive RTC treatment by talking to your LMHA or LBHA case manager. A child's strengths and family's wishes are an important piece of the decision-making process. Picking an RTC might take longer than you prefer, but a child's success depends on making the right choice.

Waiting for Placement

While your family is waiting for a residential placement, you and your child can continue receiving community mental health services to address your child's mental health needs. To support you during this time, your LMHA or LBHA case manager and CFP will meet often with your family.

While waiting for placement, if your family’s situation changes and you experience a crisis or need more immediate support, call your local crisis hotline. You can also call your LMHA or LBHA case manager and CFP. They will coordinate with HHSC and DFPS to identify extra supports that might be available to your family.

To find your local crisis hotline, visit:

[Mental Health Crisis Services](#)

My Child Has a Residential Placement. Now What?

Preparing for Placement

Your LMHA or LBHA will tell you when an RTC agrees to admit your child. You will work with the RTC and your LMHA or LBHA case manager to schedule a date for admission. You may need to submit extra documents. This will vary by RTC, but this often includes medical and educational records.

This can be a hard time and your child may have questions and concerns about treatment in an RTC. Your child may be afraid to live away from home or upset to be away from friends, school, and their normal routine. Talking to your child about placement and answering their questions as they prepare for their new living situation can help. Ask the RTC staff, your CFP, or LMHA or LBHA case manager for help.

If you have concerns before admission, talk to your LMHA or LBHA case manager or DFPS caseworker. Some of your concerns—such as uncertainty about your child leaving home—are not unusual. Your LMHA or LBHA case manager or DFPS caseworker can help support you by discussing your concerns or recommending community supports, such as parent support groups.

Questions to Consider Before Admission

As you work with the RTC to set your child's admission date, use this time to learn more about the RTC. Some questions to ask are:

- What are the RTC's policies and procedures?
- What are my child's rights and responsibilities?
- How will my child's medical needs be handled?
- When and how will I be notified of emergencies?
- What should my child bring to the RTC, such as clothing and personal items?
- What should my child not bring to the RTC?
- What documents should I bring to the RTC?

- Who needs to be present to drop off my child?
- Can I see where my child will live?
- What is the typical length of stay at this RTC? How long might my child need treatment?
- What is the name of the psychiatrist or therapist who will be working with my child?
- Who can I talk to for questions about my child?
- How can my child stay involved in religious or cultural activities?
- Can I have a copy of my child's schedule?

Transportation

After an admission date is set, you must arrange transportation for your child. If you need help, ask your LMHA or LBHA case manager or DFPS caseworker for resources.

Paying for Services

Paying for services should not be a barrier to getting the mental health care your child needs. If your child is not insured, ask your LMHA or LBHA to help you apply for Medicaid or the Children's Health Insurance Program (CHIP). If your child does not qualify for Medicaid or CHIP, call the RTC Project to ask about how your family might still access an RTC placement. Many LMHAs or LBHAs know about local programs that can help with the cost of services.

While your child is at the RTC, the RTC Project covers the cost of room and board at the RTC facility. The RTC will bill your child's insurance for medical and dental services, including any prescribed medication. For questions about coverage, call your child's insurance provider.

Admissions

Although each RTC has its own admission process, there are standard requirements across RTCs. The RTC should provide you with facts about:

- The rules and procedures?
- Who can your child talk to if they have questions or concerns?

- How you can call your child or their caseworker?
- How will they respond to and tell you of medical emergencies or serious incidents?
- How will they respond to and tell you about disaster and emergency response plans?
- Where will your child attend school?
- What is the visitation policies or procedures?
- How will you be told about your child's ongoing treatment, including changes to medication or treatment?
- How will you be engaged and included throughout the treatment process?

Placement Expectations

Your Rights and Responsibilities

When your child is admitted to an RTC, the RTC should provide you and your child a written list of your rights and responsibilities.

Your family has the right to:

- Talk with your child often;
- Know about and approve of any changes in treatment for your child;
- Approve medication changes for your child;
- Be provided with treatment and educational records for your child; and
- Call staff to discuss any questions or concerns you have about treatment for your child.

Your family must:

- Be involved in your child's treatment;
- Be involved in weekly family therapy; and
- Be involved in weekly case management and other services from the LMHA or LBHA.

The RTC staff should keep you informed of progress in your child's treatment and answer your questions and concerns in a timely and professional manner.

Maintaining Communication

HHSC recommends that you call and talk with your child often while they are away from home. Talking with your child can help them feel connected to your family, and help you track their treatment progress. Talking with your child also can help them practice the skills they are learning. This will help support your child's transition back into the community.

Each RTC has its own policies on visitation and talking to your child, so ask for the policy in writing. The RTC may have many residents and ask you to schedule a regular date and time for you to call. If for any reason your child is unable to call

you, the RTC should let you know why. Even if your child cannot call you immediately, the RTC should always have someone available to give you updates about your child. We recommend you ask for a contact person at intake. If you have trouble scheduling a time to talk to your child, call your contact person at the RTC. You can also ask your LMHA or LBHA case manager for support.

Complaints

The RTC Project is available to support families navigating the formal complaint process. A complaint may be related to:

- Quality of care or services provided;
- Interpersonal relationships, such as perceived rudeness of a provider or employee; or
- Failure to respect a person's rights.

If you have a complaint while your child participates in the RTC Project, call your LMHA or LBHA case manager, CFP, or RTC case manager for help. Complaints can often be fixed by speaking with someone directly. If you are not satisfied with the timeliness with which your concerns are addressed, or you are unhappy with the outcome of your conversation and would like to make a formal complaint, ask the LMHA or LBHA or the RTC facility about their formal grievance process. If you still have concerns, call the HHSC Office of the Ombudsman at 877-787-8999 or get help online on the HHS Ombudsman Behavioral Health Help at [Ombudsman Question or Complaint Form](#).

If you have concerns about the safety or well-being of your child, call the DFPS Statewide Intake at 800-252-5400.

Treatment Expectations

Upon admission, your child will be involved in regular services which include:

- Weekly individual and group therapy with a licensed clinician;
- Weekly family therapy with a licensed clinician;
- Medication management;
- Ongoing routine and as-needed medical care;
- Educational services; and

- Social, recreational, and habilitative services, which support or improve a person's daily living.

The RTC will ask you to sign a form acknowledging that your family will be involved in your child's treatment.

Treatment Plan

The RTC develops a treatment plan for your child within 14 days of admission. The treatment plan is a collaborative document, developed with your input, including your child's treatment goals. You are an expert on your child's needs, so it is important to provide input during the treatment planning process.

The treatment plan should be written in a way that is easy to read and include information about your child, such as:

- A brief description;
- Strengths;
- Family's strengths;
- Diagnosis;
- Medical and mental health history;
- Goals and expected outcomes of treatment and a plan for how your child will achieve those goals;
- Regular updates about your child's progress towards their goals; and
- A transition or discharge plan.

The RTC treatment team reviews and updates the treatment plan based on your child's treatment needs and progress towards their goals. The RTC will ask you to be involved in monthly treatment plan meetings to hear about the progress your child is making and provide input. If you have any concerns about your child's treatment, discuss them with your child's RTC case manager and treatment team.

Individual and Family Therapy

While your child is at the RTC, they will have weekly individual and group therapy. As a parent or guardians, you are an important partner in the treatment process, so you will be asked to be in weekly family therapy with your child. Family therapy is helpful for working through many of the challenges your family may be

experiencing. Family therapy can help family members learn how to have a better relationship with your child.

Family therapy can take place in person, over the phone, or by video conference. If you need support to go to family therapy, ask your RTC or LMHA or LBHA case manager for help.

Medication Management

A psychiatrist will manage your child's medication needs while at the RTC. Your child's psychiatrist will meet with your child at least once a month. Tell the psychiatrist about your child's previous medication history and their response to medication. If you have questions or concerns about any prescribed medication, ask your child's psychiatrist. You can ask your RTC case manager for help contacting your child's psychiatrist. If you do not hear back in two to three days, ask to speak to the RTC childcare administrator. Talking with your child's psychiatrist and treatment team will ensure you know about any changes to your child's treatment.

Spending Time at Home

As your child progresses towards your family's treatment goals, they will have the chance to spend time with you at home or in a residence offered by the RTCs, where available. You will work with your child's treatment team and your LMHA or LBHA to decide when your child and your family might be ready to spend time back at home. This may be a slow process, but your treatment team will support you. Before your child spends time at home, ask the following questions:

- How long will my child be home?
- What is my child's crisis and safety plan while they are home?
- What if my child refuses to return to the RTC?
- Can my child return to the RTC early, if needed?
- How will I meet my child's educational needs while they are home?
- How will I meet my child's medical or medication needs while they are home?
- How can I reinforce the skills my child is learning while they are home?

Spending time at home can help your child practice the skills they learned in the RTC. This is also a chance to practice your child's transition back home. Let your child's treatment team know of any challenges or successes during their time at

home. It can help identify future treatment needs for your child. If you have concerns about your child's time at home or if you feel that time at home is unsafe, ask your LMHA or LBHA case manager and the RTC for support.

Educational Services

Your child will continue their education at the RTC. You should give copies of your child's school records to the RTC. Each RTC has a partnership with a local independent school district or on-campus charter school. If your child has an Individualized Education Plan or 504 Plan, it will continue during placement. The RTC should provide regular updates on your child's academic progress. Go to meetings about your child's education. Ask the RTC for a contact person for your child's educational team.

If you have concerns about your child's education while at an RTC, visit:

[TEA Complaints and Investigations](#).

Parent and Family Supports

Parents are equal and important partners in the treatment process and need to be involved in their child's treatment. Besides weekly family therapy, you should participate in services offered by your LMHA or LBHA, including:

- Routine case management meetings with your LMHA or LBHA case manager to help your family access necessary care and services;
- Skills training to help your family adjust to special challenges related to your child's mental health needs; and
- Family partner services to support family members by sharing their similar lived experiences of raising a child with significant mental health needs. They can be a source of support for you since they know what you are going through.

Your family is experiencing a lot of change and your LMHA or LBHA case manager and CFP can help support you throughout the process.

Transition Planning

Transition planning is an important part of the treatment process that begins on the first day of RTC placement with a goal of helping your child transition successfully back to your home. Each transition plan is developed to meet the specific needs of

your child. As your child begins to build and develop skills, their treatment plan will get updated to reflect their growing strengths and new needs.

Planning for transition early helps your child’s treatment team focus on building the skills and supports your child needs to transition back home. It is important for your treatment team to discuss the skills your child needs to be successful in your home. Your treatment team should also discuss what supports you will need to remain safe at home. Your transition plan should include facts about your child’s:

- Diagnosis or diagnoses;
- Medication;
- Ongoing mental health needs;
- Educational needs; and
- Crisis and safety plan.

Your child’s transition plan should be finalized at least one month before their discharge, although three months is recommended. Finalizing a transition plan before discharge helps ensure necessary community-based mental health services are scheduled and in place.

Transitioning to Community Mental Health Services

Your child may need to continue mental health services after they leave the RTC. Your LMHA or LBHA case manager will help your family identify community-based mental health services appropriate for your child. They can also support you in scheduling a meeting to be assessed for these services.

Some of the supports your child and family might be referred to may include:

- Medication management
- Community Resource Coordination Groups
- YES Waiver
- Case management or Wraparound services
- CFP services
- Peer support groups or other youth groups and activities

- Intensive outpatient program
- Partial hospitalization program

Ask your CFP or LMHA or LBHA case manager to explain the benefits of each service or program and what to expect. It is important to follow through with any recommended services to support your child's path towards recovery.

APPENDIX A: Acronyms

CANS – Child and Adolescent Needs and Strengths Assessment

CFP – Certified Family Partner

CHIP – Children’s Health Insurance Program

CRCG – Community Resource Coordination Group

DFPS – Department of Family and Protective Services

HHSC – Health and Human Services Commission

LBHA – Local Behavioral Health Authority

LMHA – Local Mental Health Authority

RTC – Residential Treatment Center

SED – Serious Emotional Disturbance

YES Waiver – Youth Empowerment Services Waiver

APPENDIX B: RTC Project: Overview of Roles

Department of Family and Protective Services

- May submit referral to the HHSC RTC Project team
- Assists the family to submit application packet to HHSC
- Provides additional support to the family, as needed, while a child is waiting for residential placement

HHSC

- Receives the referral and informs the LMHA or LBHA of next steps
- Provides oversight for the RTC Project by receiving and reviewing all referrals
- Approves eligibility through the RTC Project and informs the LMHA and LBHA of the next steps
- Sends referrals to RTCs that may meet the child's treatment needs
- Approves continued placement and funding for children in residential placement

Local Mental Health Authority or Local Behavioral Health Authority

- May submit referral to the RTC Project
- Assists the family to submit application packet to HHSC
- Assesses the child's eligibility for the RTC Project by completing the CANS to determine child's mental health needs and appropriateness for the RTC project
- Provides families with community mental health supports before, during, and after residential placement
- Supports the family while children are in residential placement

Residential Treatment Center

- Reviews referrals received from HHSC for potential admissions into the program

- Upon acceptance into a program, provides clinical treatment for children in residential placement
- Schedules treatment services, which include individual and family therapy
- Engages the family in the treatment process
- Assesses readiness for community transition, in collaboration with the family and LMHA or LBHA

APPENDIX C: Rights and Responsibilities

My Child's Rights and Responsibilities (adapted from the DFPS)

Safety and Care

I have the right to:

- Be free from abuse, neglect, exploitation, and harassment from any person in the facility where I live.
- Be treated with dignity and respect.
- Be free from unlawful discrimination based on race, color, national origin, religion, age, sex, or disability.
- Live in a safe, healthy, and comfortable place.
- Be told the rules by a person at the facility where I live.
- Be treated fairly.

Family

I have the right to:

- Talk with my family regularly. If I am told I cannot talk to someone, I have the right to know why.

Have a Normal Life

I have the right to:

- Speak and be spoken to in my own language. This includes sign language if I am deaf or hearing impaired and materials in Braille if I am blind or visually impaired.
- Go to school and get an education that fits my age and my needs.
- Have my religious and cultural needs met.
- Be involved in activities that are appropriate for my age and maturity.

- Privacy, unless an appropriate professional says the restrictions are necessary for my best interest. I have a right to know why.
- Personal care, hygiene, and grooming products and training on how to use them.
- Comfortable clothing for my age and size and similar to clothing worn by other children. I have the right to clothing that protects me against the weather.
- Personal space in my bedroom to store my clothes and belongings.
- Know about search policies (going through my personal items). I have the right to be told if I am not allowed to have certain items and to ask why I cannot have them. If my personal items are taken away, it must be documented.
- Healthy food in healthy portions for my age.
- Agree in writing before taking part in any publicity or fund-raising activity for the place where I live, including the use of my photograph.
- Refuse to make public statements showing my gratitude.

Discipline

I have the right to:

- Be free of any harsh, cruel, unusual, unnecessary, demeaning, or humiliating punishment. This means I should never:
 - ▶ Be shaken, hit, spanked, or threatened with being shaken, hit, or spanked;
 - ▶ Be forced to do unproductive work;
 - ▶ Go without food, sleep, access to a bathroom, mail, or family visits;
 - ▶ Have myself or my family made fun of;
 - ▶ Be threatened with losing my placement; or
 - ▶ Be treated in a way meant to embarrass, control, harm, intimidate, or isolate me by use of physical force, rumors, threats, or inappropriate comments.
- Be disciplined in a manner that is appropriate to how mature I am, my developmental level, and my medical condition. I must be told why I was

disciplined. Discipline does not include the use of restraint, seclusion, corporal punishment, or threat of corporal punishment.

- Know about emergency behavioral intervention policies in writing. I have the right to know how they will control my actions if I cannot control my actions, and to know how they will keep me and those around me safe.

My Treatment

I have the right to:

- Receive a copy of my treatment plan that addresses my needs and services, including transition activities.
- Be involved in creating my plan for services. I have the right to ask someone to support me in my participation.
- Appropriate medical, dental, and vision care.
- Mental health and developmental services that adequately meet my needs.
- Be free from pressure to take unnecessary or too much medication.
- Be involved in decisions about my care.

My Privacy

I have the right to:

- Expect that records and personal details will be kept private and will be discussed only when related to my care.
- Get necessary personal details within 30 days of leaving care, including my medical and educational records.

Complaints

I have the right to:

- Make calls, reports, or complaints without being punished, threatened with punishment, or retaliated against; and I have the right to make any of these calls privately and anonymously if I choose and the call center permits it. I have the right to call:

- ▶ DFPS Texas Abuse and Neglect Hotline at 800-252-5400
- ▶ HHSC Office of the Ombudsman at 800-252-8154
- ▶ HHSC Complaint and Incident Intake at 800-458-9858

APPENDIX D: Important Contact Information

Everyone has the right to feel safe. To report suspected abuse, neglect, or exploitation, contact DFPS at:

Toll Free: 800-225-5400

Relay Texas: 7-1-1 or 800-735-2989

[Texas Abuse Hotline Website](#)

To report suspected abuse or neglect of people who have disabilities while they are in a residential setting, call the HHSC Complaint and Incident Intake at:

Phone: 800-458-9858

To report allegations of violations of civil rights, including discrimination, contact the HHSC Civil Rights Office at:

Mail: 701 West 51st Street

Mail Code: W206

Austin, TX 78751

Phone: (512) 438-4313

Fax: (512) 438-5885

Complaints

The RTC Project is here to support you. If you have a complaint, reach out to your case manager and CFP for help. If you are not satisfied with the outcome of your conversation and would like to make a formal complaint, ask the LMHA or LBHA or the RTC facility about their formal grievance process. If your concerns remain, call the HHSC Office of the Ombudsman.

A rights protection officer, sometimes known as a client rights officer, is responsible for receiving complaints or allegations of violations of rights, allegations of inadequate provision of services, and requests for advocacy from people receiving services. Each LMHA or LBHA has a rights protection officer who can help you to fix concerns you may have about the community mental health services you or your family are receiving.

My Client Rights or Rights Protection Officer is:

Name:

Phone:

Email:

To file a complaint:

Mail: Texas Health and Human Services Commission
Office of the Ombudsman
Attn: Behavioral Health Ombudsman
P.O. Box 13247, Mail Code: H700
Austin, TX 78711-3247

Toll Free: 800-252-8154

Relay Texas: 7-1-1 or 800-735-2989

[HHS Office of the Ombudsman](#)

APPENDIX E: My Contact Sheet

RTC INFORMATION
RTC Name:
Placement Date:
RTC Caseworker Name:
RTC School Contact:
RTC Discharge Date:

LMHA or LBHA INFORMATION
LMHA or LBHA Name:
LMHA or LBHA Caseworker Name:
Family Partner Name:
LMHA or LBHA Crisis Hotline:
LMHA or LBHA YES Waiver Line:

APPENDIX F: My Calendar

Weekly Meetings				
MONDAY /	TUESDAY /	WEDNESDAY /	THURSDAY /	FRIDAY /
SATURDAY /		SUNDAY /		
NEXT WEEK:				

TO DO:

GOALS:

NOTES:

APPENDIX G: My Child's Treatment Summary

Instructions: This summary can be used to help document your child's mental health needs and preferences.

CHILD TREATMENT SUMMARY
Family Vision and Goal(s):
While my child was in treatment, we focused on:
As my child keeps going in treatment, we can build on:
When there are everyday challenges, I can get support from:
At home, my child might benefit from:
At school, my child might benefit from:
Some other important things to remember or know:
If I need copies of my child's medical or education record I can talk to:

APPENDIX H: My Child's Treatment Goals

Instructions: This document can be used to help your child identify and talk about their goals and preferences for treatment.

YOUTH SUMMARY
<p>My Vision and Goal(s):</p> <p>My perfect day looks like...</p> <p>I will...</p> <p>I want to...</p>
<p>I can work towards my vision and goals by:</p> <p>I will...</p> <p>I can...</p> <p>With help from...</p>
<p>Strength(s):</p> <p>I feel proud of myself when...</p> <p>I like to...</p> <p>I am good at...</p> <p>I can...</p>
<p>This is what I like or what worked well:</p> <p>I work best when...</p> <p>I like when...</p> <p>I will respond when...</p>

This is what I do not like and did not work well:

I don't like...

It makes me mad, sad, angry when...

Even though I learned a lot, I might still need or want help with:

I am scared or worried about...

I still need help to...

Sometimes I need to be reminded that...

I feel safe when:

I feel unsafe when:

In school, I was working on:

Some other important things to know:

APPENDIX I: Additional Supports

HHSC

2-1-1 Texas

2-1-1 Texas is an HHSC program that helps Texas citizens connect with the services they need. No matter where you live in Texas, you can dial 2-1-1 or 877-541-7905, and find information about services in your local community, such as food or housing, child care, crisis counseling, or substance abuse treatment.

Visit: [211 Texas Find Help](#) or call 2-1-1

Children's Mental Health Services

Visit: [Children's Mental Health Services](#)

Child Care Licensing

Child Care Licensing (CCL) is a statewide program that regulates child care operations and child-placing agencies to protect the health, safety and well-being of children in out-of-home care. CCL inspects child care operations, making sure they meet the standards Texas has set.

Visit: [Child Care Safety Services](#)

LMHAs or LBHAs

Texas Health and Human Services contracts with 37 local mental health authorities and two local behavioral health authorities to deliver mental health services in communities across Texas.

Visit: [Find Your Local Mental Health or Behavioral Health Authority](#)

Mental Health Texas

MentalHealthTX.org is a website that provides information and resources to Texas residents who may have mental health needs or who want to support someone who does. The website includes helpful information, such as a treatment locator, helpful mobile applications, a behavioral health activities calendar, and important numbers

to connect Texans with immediate help, including 2-1-1 and the Veterans Crisis Line.

Visit: [Mental Health Texas](#)

Children’s Mental Health RTC Project

Visit: [Childrens Mental Health Residential Treatment Center Project](#)

Texas Education Agency

The Texas Education Agency is the state agency that oversees primary and secondary public education. The Texas Education Agency improves outcomes for all public school students in the state by providing leadership, guidance, and support to school systems.

Visit: [Texas Education Agency](#)

Your Texas Benefits

YourTexasBenefits is a website that can help Texans learn about or apply for Texas benefits such as health services, SNAP nutritional benefits, TANF cash benefits, and medical care.

Visit: [Your Texas Benefits](#)

National and State

Accept Texas

ACCEPT is a movement of youth and young adults who connect to education, advocate, and grow youth voice in Texas.

Visit: [Accept Texas](#)

Crisis Text Line

Crisis Text Line serves anyone, in any type of crisis, providing access to free, 24/7 support by text.

Text **HOME** to **741741** to reach a crisis counselor.

Jed Foundation

JED is a nonprofit that protects emotional health and prevents suicide among our nation's teens and young adults. JED partners with high schools and colleges to strengthen their mental health, substance misuse, and suicide prevention programs and systems.

Visit: [Jed Foundation](#)

Texas Building Bridges Initiative

The Texas Building Bridges Initiative (TxBBI) is a partnership between Texas System of Care, HHSC, DFPS, and the Texas Institute for Excellence in Mental Health. TxBBI is committed to creating strong, coordinated partnerships between families, youth, community and residential treatment providers, and policy makers to ensure that comprehensive services and supports are family-driven, youth-guided, strengths-based, culturally and linguistically competent, individualized, evidence-informed, and consistent with research on sustained positive outcomes.

Visit: [Texas Building Bridges Initiative](#)

Texas Family Voice Network

The Texas Family Voice Network is a diverse collaborative of family members, community members, state agency representatives, family run organizations and other stakeholder groups, united to provide one common voice to promote successful outcomes for children's mental and behavioral health.

Visit: [Texas Family Voice Network](#)

Texas Parent to Parent

Texas Parent to Parent empowers families to be strong advocates through parent-to-parent support, resource referral, and education.

Visit: [Texas Parent to Parent](#)

Navigate Life Texas

Navigate Life Texas is especially for families and parents of children with disabilities or special healthcare needs and is designed to offer support, inspiration, resources, and links to services available.

Visit: [Navigate Life Texas](#)

988 Suicide and Crisis Lifeline

A free, confidential, 24-hour hotline to anyone in suicidal crisis or emotional distress. An online confidential chat is also available.

Call or text: 9-8-8

Chat: [988 Suicide & Crisis Lifeline Chat and Text](#)

Veterans Crisis Hotline

Connects Veterans in crisis and their families and friends with qualified, caring Department of Veterans Affairs responders through a confidential toll-free hotline, online chat, or text.

Call: 9-8-8, then press 1

Text: 838255

Visit: [Veterans Crisis Line](#)