

Intellectual and Developmental Disability and Behavioral Health Services

Fiscal Year 2020
In Review



TEXAS
Health and Human
Services

Message from the Deputy Executive Commissioner

I'm thrilled to present the first Intellectual and Developmental Disability and Behavioral Health Services Department (IDD-BHS) Annual Report for 2020 which highlights our department's many accomplishments.

I commend the IDD-BHS staff, leadership team, and our committed providers for their incredible work and dedication in 2020, ensuring we gave our best to the Texans we served. I thank our advisory council and committee members who volunteered their time throughout the year to help shape the Texas service delivery system. Through our collective efforts, you made a difference in the lives of the people we serve. Together, we accomplished meaningful results highlighted in this inaugural annual report.

With the support of the Texas Legislature, we successfully implemented several legislative initiatives that will enhance the IDD and BHS service delivery system. Most notably, the implementation of Senate Bill 633, 86th Legislature, Regular Session, 2019, which created the All Texas Access project. This initiative formed rural-serving local mental health and behavioral health authorities (LMHA/LBHAs) in collaborative regional groups to develop plans for increasing capacity and access to mental health services. In response to the pandemic, the Texas Health and Human Services Commission (HHSC) launched the COVID-19 Mental Health Support Line to provide continuous mental health support throughout the pandemic to all Texans. We made significant progress toward certifying LMHAs as Certified Community Behavioral Health Clinics (CCBHCs) which integrate behavioral and physical care as well as enhance quality. I am proud Texas has received close to \$300 million in federal funds since 2017 to continue the fight against the opioid crisis. I am also very excited about the development of the first *IDD Strategic Plan* which represents a culmination of many hours of dedicated work by staff and external stakeholders. Thanks to the Statewide Behavioral Health Coordinating Council, Texas now has a one-stop behavioral health website, www.mentalhealthtx.org aligned with 2-1-1 and translated into more than 60 languages.



In addition to IDD-BHS impacts, you will read about numerous administrative improvements implemented in 2020 which include successfully executing greater than 90 percent of contracts by the end of fiscal year 2020 as well as alignment of organizational structures in IDD-BHS that yielded greater productivity and resulted in a reduction in staff vacancy rates to 8 percent.

As we move into fiscal year 2021, we look forward to continued progress toward addressing our departmental goals as well as closing gaps in both the statewide behavioral health and IDD strategic plans.

We will continue our collective and focused efforts toward a unified approach to behavioral health and IDD services that sets us on course for all Texans to have access to care at the right time and place.

A handwritten signature in black ink that reads "Monique Souza".



TEXAS
Health and Human
Services

Table of Contents

Mission, Vision, and Values
Page 1

Budget and Contracts
Page 3

**Making A Positive Difference
in the Lives of the People We Serve**
Page 7

Process Improvements
Page 19

Leadership Team
Page 2

COVID-19 Response
Page 5

Exceeding Expectations
Page 15

Employee Engagement
Page 22

Mission, Vision, and Values

We are IDD-BHS



Our Mission and Vision

The IDD-BHS mission is to establish accountable and coordinated IDD and behavioral health systems of care that direct performance to achieve meaningful clinical and cost-effective outcomes for all Texans.

The IDD and BHS vision is to ensure that Texans have access to the right IDD and behavioral health services at the right time and place.

Our Values

IDD and behavioral health programs and services must:

- Be person-centered with the strengths and the needs of the person determining the types of services and supports provided;
- Be culturally and linguistically sensitive with agencies, programs, and services that reflect the cultural, racial, ethnic, and linguistic differences of the populations they serve;
- Be delivered in a flexible manner where possible, to meet the needs of each child, family, or adult close to their community;
- Be accessible to all Texans regardless of setting (i.e. prison, jail, school, etc.) through the use of innovative technologies, such as telemedicine, that increase access to treatment and address transportation barriers; and
- Ensure each child, family, or adult receives care based on the person's unique needs.

IDD–BHS Leadership Team



Robert Dole
Deputy Associate
Commissioner,
System Integration



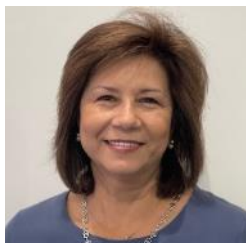
Courtney Harvey, PhD
Associate Commissioner,
Office of Mental Health
Coordination



Trina Ita
Associate Commissioner,
Behavioral Health
Services



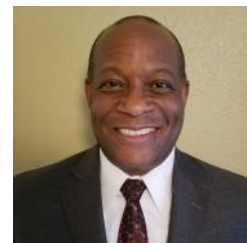
Diya Lalchandani
Director,
Office of
Decision Support



Nora Saldivar
Director,
Cross Division
Coordination



Ed Sinclair
Director,
Business Operations



Roderick Swan
Associate
Commissioner,
Contract Operations



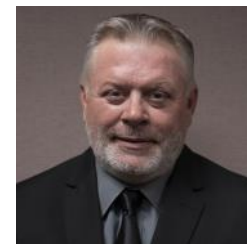
Jay Todd
Director,
Innovation &
Engagement



Haley Turner
Associate Commissioner,
IDD Services



Robert Walker
Executive Assistant



Donnie Wilson
Director,
Special Projects

Department Overview

With the support of the Texas Legislature and HHSC Executive Leadership over the past biennia, the Intellectual and Developmental Disability and Behavioral Health Services Department (IDD-BHS) has been able to make important strides in furthering its goals to deliver quality and effective substance use disorder, mental health and IDD services to all Texans.

The department provides a unified and coordinated approach to the delivery of appropriate and cost-effective IDD and behavioral health services through a statewide system of care; thereby ensuring Texans have access to the right services at the right time. By collaborating with stakeholders to support and extend innovation and services delivery while eliminating duplication, IDD-BHS bridges local efforts to accessing services; including inpatient, outpatient, justice-involved, veterans, IDD, youth, and community collaboration, to provide a seamless experience for individuals who need assistance.

IDD-BHS Clients Served in Fiscal Year 2020

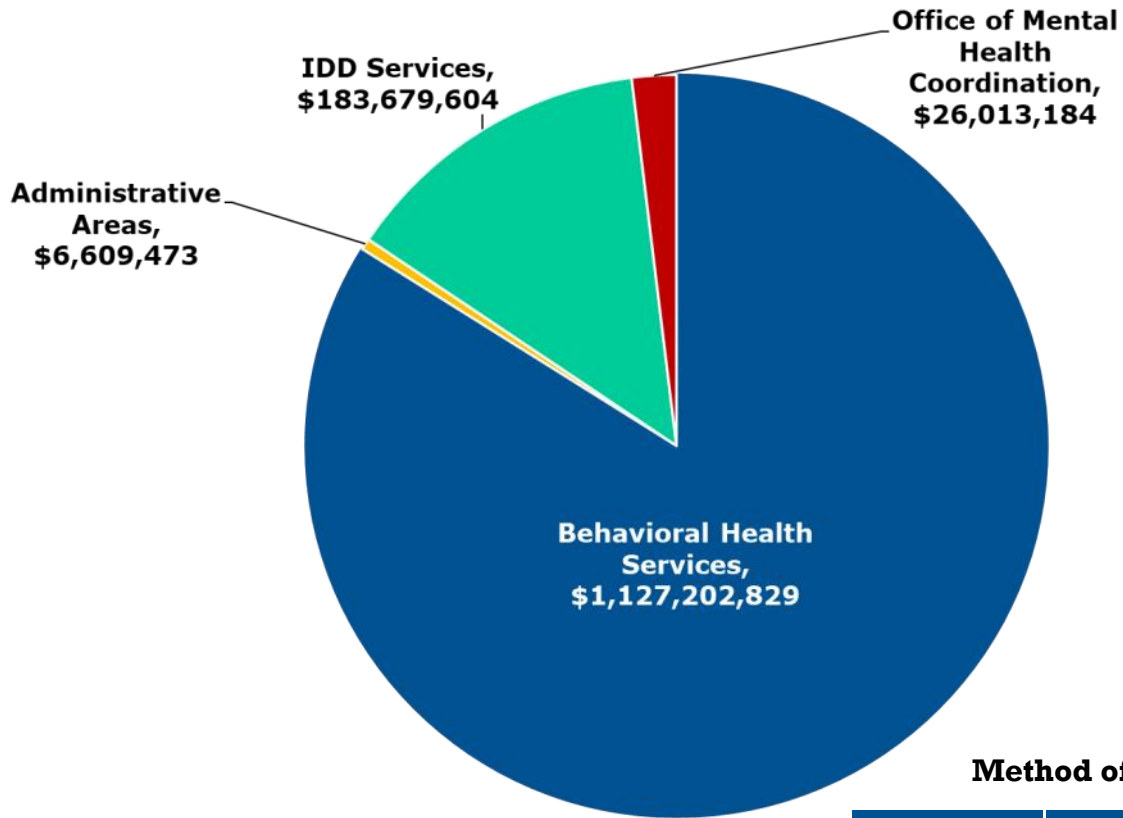
Program Area	Number Served
Behavioral Health Services	3,322,584
IDD Services	72,455
Office of Mental Health Coordination	167,424
TOTAL	3,562,463

Fiscal Year 2021 Department Goals

1. Further enhance Texas' national presence and recognition for innovative IDD-BHS approaches and enhance collaboration with other states regarding best practices.
2. Improve reporting on key IDD-BHS performance indicators that evaluate the effectiveness of business, legislative and federal initiatives to inform evidence-based programmatic decisions.
3. Build new and strengthen existing interagency and stakeholder collaborative relationships through targeted, communication initiatives, using technology to maximize reach and outcomes.
4. Develop strategies to ensure leadership development, employee engagement/retention and implementation of staff performance measures to ensure high quality performance throughout IDD-BHS.
5. Refine and/or create policies and procedures to clearly define department functions across IDD-BHS.
6. Implement modern data systems/processes to integrate with current HHSC and best in-class systems.
7. Become more data-driven, improve decision making, and maximize available funding.

IDD-BHS Fiscal Year 2020 Budget

\$1,343,505,090



Method of Finance

Source	Dollar Amount	Budget Percentage
General Revenue	\$926,100,147	69%
Federal Funds	\$407,139,008	30%
Other Funds	\$10,265,936	1%

IDD-BHS Fiscal Year 2020 Contracts

Program Area	Number	Value
Behavioral Health Services		
Mental Health	527	\$869,906,622
Substance Use Disorder	615	\$261,616,136
Office of Mental Health Coordination	13	\$3,442,371
IDD Services	86	\$107,406,496
Special Projects	4	\$598,218
TOTAL	1,245	\$1,242,969,843

COVID-19 Response

Within the last fiscal year, the Intellectual and Developmental Disability and Behavioral Health Services Department (IDD-BHS) responded to the COVID-19 pandemic, amassing a total of approximately \$26 million in federal grant funding. Over the past year, more than 1.6 million people have been reached through media, education materials, phone calls, and emails, including almost 4 million social media reaches.

Statewide COVID-19 Mental Health Support Line

A hugely successful Statewide COVID-19 Mental Health Support Line launched March 31, 2020, in coordination with The Harris Center for Mental Health and IDD, a local mental health authority (LMHA). Available to all Texans 24 hours a day, 7 days a week, toll-free at 833-986-1919, this resource helps Texans experiencing anxiety, stress, or emotional challenges due to the COVID-19 pandemic, including crisis counseling, referrals to more in-depth services when needed, and resource linkage. English (<https://bit.ly/MHSupportFlyer>) and Spanish (<https://bit.ly/MHSupportFlyer-Spanish>) flyers were developed to promote the resource and widely distributed.

Support Line Expansion

On May 11, 2020, HHSC launched the Virtual Support Groups for Frontline Workers in Texas. Individuals who identify themselves as frontline workers may call the support line for referral to a virtual support group where they can speak with their peers about the mental health effects of helping others during the pandemic.

COVID-19 Mental Health Support Line received 10,011 calls between March 31, 2020, inception of the line, and Dec. 19, 2020, with callers representing 190 counties in Texas. Of the calls, 394 callers directly connected to LMHAs/local behavioral health authorities (LBHAs) crisis hotline, 1,460 people were provided with the number to LMHA/LBHA crisis hotline or main number, 768 people connected with a Crisis Counseling Program (CCP) provider, and 122 frontline workers were provided with virtual frontline worker support group information. The line was also staffed to respond to calls in Spanish. Figures 1 and 2 show the age demographics of the callers and the reasons for the calls, respectively, through Dec. 19, 2020.

- 1 COVID-19 Statewide Mental Health Support Line: 1- 833-986-1919
- 2 10,011 calls from March 31, 2020, to Dec. 19, 2020
- 3 Callers ranged from age 18 to 65 and older and represented 190 Texas counties

Figure 1. COVID-19 Mental Health Support Line Caller Ages

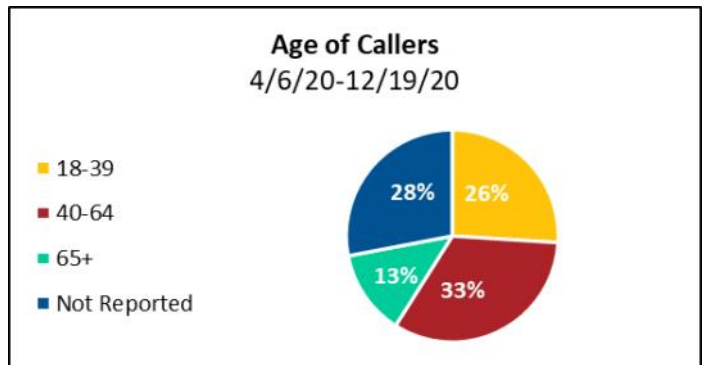
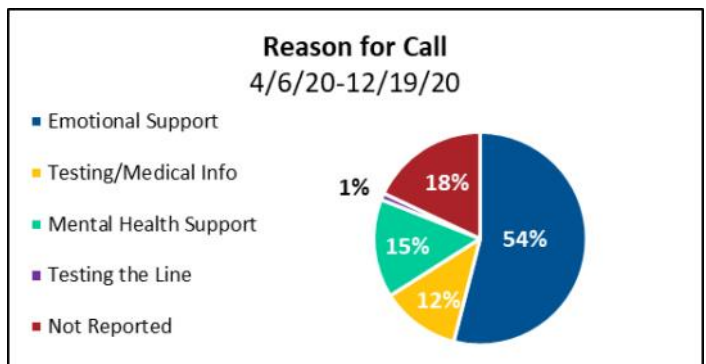


Figure 2. COVID-19 Mental Health Support Line Call Reasons



COVID-19 Crisis Counseling Program Grant

The Disaster Behavioral Health Services (DBHS) Team was instrumental in procuring federal funding to help Texans with crisis counseling during the pandemic. As a result HHSC received a \$5.8 million Federal Emergency Management Agency (FEMA) disaster grant award to aid in the COVID-19 response and recovery efforts. The funding allowed HHSC to provide short-term crisis counseling services to 260,000 Texans affected by COVID-19 through contracts with 31 LMHAs/local behavioral health authorities (LBHAs). In addition to the support line, COVID-19 crisis counseling services were delivered through social media campaigns, telephone outreach, public serve announcements, video conferencing, mass mailings and distribution of psychoeducational materials.

In addition to the Immediate Services CCP grant, DBHS secured more than \$20 million in additional federal funding for disaster crisis counseling services for Texans impacted by the COVID-19 pandemic through the FEMA Regular Services CCP in October 2020. This grant extends counseling services to 28 LMHAs/LBHAs in Texas to connect an anticipated additional 240,000 Texans throughout the state to short-term crisis counseling services.

The COVID-19 Immediate and Regular Services CCPs provided a combined total of 12,810 individual services, 20,436 group services, more than 1.76 million phone contacts, emails, and educational materials, and more than 4.3 million social media reaches between May 5, 2020, and Dec. 1, 2020.

Between May 5, and Dec. 1, 2020, COVID-19 CCP provided:

- 12,810 individual services
- 20,436 group services
- More than 1.76 million phone contacts emails, and educational materials provided
- More than 4.3 million social media reaches



Find Statewide Behavioral Health Coordinating Council helpful COVID-19 web-based resources



View a holiday public service announcement promoting the Statewide COVID-19 Mental Health Support Line

at http://bit.ly/HolidayPSA_COVID

The CCP outreach model changed significantly due to the nature of COVID-19. All activities were geared toward social media and virtual communications such as the Virtual Relaxation Room from Emergence Health Network, an LMHA and CCP grantee, at <https://ccprelaxation.org>.

CCP RELAXATION powered by

The Virtual Relaxation Room For The Crisis Counseling Program In Response To COVID 19.

Here you will find virtual resources meant to help stimulate and relax your senses.

We encourage you to take a moment and look around, try some things out, and share these resources with anyone whom you think might benefit from them.

Making a Positive Difference in the Lives of the People We Serve

Certified Community Behavioral Health Clinics Expansion

In support of the fiscal year 2020 HHS Business Plan initiative to enhance behavioral health outcomes by expanding capacity for community-based behavioral health services, the Innovation & Engagement team certified seven new Certified Community Behavioral Health Clinics (CCBHCs) in fiscal year 2020, meeting the business plan goal for 2020.

7 additional
CCBHC sites
expanded
integrated care in
the community
for a total of 19
sites in the state
in fiscal year 2020

Texas gained national recognition for the expansion of our CCBHC sites from 12 to 19 in fiscal year 2020. By using the CCBHC framework to create a more efficient and coordinated system, Texas is expanding the capacity for community-based behavioral health services and enhancing behavioral health care outcomes for vulnerable populations with serious and persistent mental illness, emotional disturbances, and substance use disorders.



(L to R) Paul Maddock, Carla Carlock-Self, Jenny McFadden, Cherhonda Brown, Cindy Grace, and CEO Waymon Stewart celebrate Andrews Center's CCBHC certification.



As part of preparing for CCBHC certification, (L to R) Terri Donsbach, Tionne Fuller, Marlo Hawxhurst, and Jason Pollack of LifePath Systems hosted CCBHC Jeopardy!

Home and Community-Based Services Slots

Intellectual and Developmental Disability (IDD) Services released and monitored 2,724 Home and Community-Based Services (HCS) slots in fiscal year 2020, with 1,012 people completing enrollment into the waiver, and another 1,255 people in the process of enrollment. Of the 1,012 people enrolled, it is important to note:

- 324 people received a crisis or nursing facility diversion slot;

- 113 people transitioned from institutions (State Supported Living Centers, Nursing Facilities);
- 66 young adults aged out of Child Protective Services conservatorship; and
- 509 people enrolled from the HCS interest list.

Of the 2,724 slots released, 1,851 were interest list reduction slots and 873 slots were the number of attrition slots released.

Texas Targeted Opioid Response

From May 2017 to August 2020, Texas received more than \$280 million in federal funding awards to fight the opioid crisis. The funding helps address unmet treatment needs and prevent overdose deaths in Texas. Service provision includes prevention, treatment, or recovery support services through programs such as medication assisted treatment (MAT), peer coaching, disposal of prescription drugs, and overdose-related emergency response services.

In fiscal year 2020, HHSC focused efforts on preventing opioid overdose and increasing access to treatment and recovery. HHSC successfully exceeded fiscal year 2019 numbers and its fiscal year 2020 goal as shown by an increase in number of people served in evidence-based treatment for opioid use disorder from 32.57 percent in fiscal year 2016 to 66 percent in fiscal year 2020 (See Figure 3); and in the number of overdose reversals in the community (See Figure 4).

HHSC trained more than 1,200 providers through 34 trainings on overdose reversal held across several Texas cities. More than 140,000 overdose reversal medication kits were distributed to traditional and non-traditional first responders along with more than 180,000 safe disposal pouches to coalitions and consumers, exceeding fiscal year targets. People served totaled 653,014 with 341 admissions to MAT attributed, in whole or in part, to a Recovery Coach.

Figure 3. Percent Opioid Use Disorder Admissions to MAT

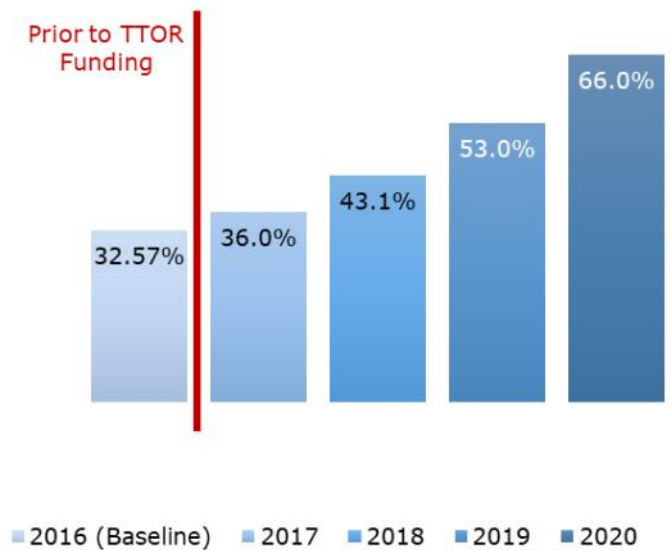


Figure 4. Opioid-Related Overdose Reversals Since 2018



Texas Targeted Opioid Response team members (L to R) Jose Flores, Kasey Strey, Lisa Ramirez, and Danielle Hodgson are on hand for Texas A&M University's (TAMU) Opioid Overdose Education and Naloxone training. More than 400 Aggies received naloxone rescue kits at the Feb. 12, 2020, TAMU training, one of the largest single opioid reversal trainings in the nation.

Additional Opioid Service Outcomes

Comparison of initial and follow up assessments from December 2019 through September 2020 for Texas Targeted Opioid Response (TTOR) participants in MAT and recovery services, showed vast improvements in people reporting: no alcohol or illegal drug use; currently employed or attending school; and in reporting social connections.



Learn more about the TTOR initiative by visiting

www.TXOpioidResponse.org

Residential Treatment Center Relinquishment Avoidance Project

The Residential Treatment Center (RTC) Relinquishment Avoidance Project is an overnight residential treatment service for children ages 5 to 17 whose parents have been referred by the Texas Department of Family and Protective Services.

The RTC Relinquishment Avoidance Project prevents the child from being legally removed from the family to receive needed treatment services; helps the child learn how to manage symptoms of mental illness; helps the family learn skills for healthier relationships; and provides a safe place for the child to learn how to positively express emotions and live with others.

RTC reported an increase in the number of youth successfully diverted from relinquishment. In fiscal year 2020, the project received 143 unique referrals. Of these referrals, 45 youth were placed in a residential treatment center for intensive out-of-home treatment and 46 youth were successfully diverted from placement because they were connected to community mental health services. This represents a 72 percent increase in referrals, a 45 percent increase in placement, and an 84 percent increase in diversion over the previous fiscal year.

Coordinated Specialty Care Program

The Coordinated Specialty Care (CSC) program provides outpatient behavioral health services to people experiencing an early onset of psychosis. These services are for people ages 15-30 who have a psychotic disorder diagnosed within the past two years. People are served via a team-based approach with the goal to empower a person's ability to lead a self-directed life within the community. Helping the individual achieve a satisfying, competitive school or work environment is central to the team's mission.

In fiscal year 2020, the Intellectual and Developmental Disability and Behavioral Health Services Department (IDD-BHS) served 978 people, exceeding the 720 person goal of the mental health block grant. Other outcomes from fiscal year 2020 include:

- 68 percent decrease in crisis services since receiving CSC-team interventions;
- 67 percent decrease in hospitalization since receiving CSC-team interventions; and
- 28 percent decrease in jail admissions since receiving CSC-team interventions.



Community Mental Health Waitlist

Thanks to ongoing focus and funding from the Texas Legislature, the adult community outpatient mental health waitlist numbers for all services steadily declined in fiscal year 2020 from a high of 336 people in October 2019 to 55 individuals in August 2020.

The children's community outpatient mental health waitlist was consistently low in fiscal year with monthly totals between 0-2 children. Seven of the last eight months in fiscal year showed centers with no children on the waitlist.

Coordinated Specialty Care Program Fiscal Year 2020 Key Accomplishments:

- 68 percent decrease in crisis services
- 67 percent decrease in hospitalization
- 28 percent decrease in jail admissions

Home and Community-Based Services-Adult Mental Health Services

Despite operational and logistical demands associated with the COVID-19 pandemic, the Home and Community-Based Services-Adult Mental Health (HCBS-AMH) program experienced growth during fiscal year 2020. Providing home and community-based services to adults with serious mental illness through an array of services to match each person's needs, HCBS-AMH served a total of 328 participants during fiscal year 2020, a 47 percent increase from 225 unduplicated participants served in fiscal year 2019. Services are designed to support long-term recovery from mental illness and help the person to live and experience successful tenure in their chosen community.

Through fiscal year 2020, HCBS-AMH was able to enroll and support people discharging from state hospitals. A total of 61 people were able to successfully discharge to the community and the HCBS-AMH program. This is a 38.6 percent increase from the 44 discharges in fiscal year 2019. Of these, 40 discharges occurred from February through August, during the COVID-19 pandemic.

To date, no HCBS-AMH participants have tested positive for COVID-19.

Outcomes

HCBS-AMH serves three target populations: people

HCBS-AMH fiscal year 2020 outcomes evaluation results show:

- 82 percent of people with previous long-term psychiatric hospitalizations did not experience a re-hospitalization
- 60 percent of people enrolled due to frequent utilization of emergency departments experiences a reduction in emergency department utilization.
- Of those enrolled due frequent 85 percent reduction incarcerations for people enrolled due to frequent confinement in jail

with a history of long-term psychiatric hospitalization; individuals with serious mental illness and frequent utilization of emergency departments; and people with serious mental illness and frequent confinement in county jails.

In fiscal year 2020, HCBS-AMH completed an evaluation of outcomes for program participants. Results show a reduction in repeat hospitalizations, incarcerations, and emergency department visits.

Statewide Behavioral Health Coordinating Council Progress Overview



Community Mental Health Grant Program — HB 13-85R

The Community Mental Health Grant Program supports comprehensive, data-driven mental health systems that promote both wellness and recovery. Established by House Bill 13, 85th Legislature, Regular Session, 2017, by Representative Four Price, the program design fosters community collaboration, reduces duplication of services, and strengthens continuity of care. Community Mental Health Grant Program’s variety of mental and behavioral health programming consists of five distinct services types: Access to Care, Co-occurring Disorders/Substance Use Disorder Services, Crisis and Forensic Services, Peer Support Services, and School-Based and Early Intervention Services.

During fiscal year 2020, Community Mental Health Grant program grantees provided or coordinated services for 36,136 unduplicated people during the year. The Community Mental Health Grant program projects served more than 8,000 people on average monthly in fiscal year 2020, covering 127 counties and nearly all metropolitan areas with populations over 100,000. In fiscal year 2020, HHSC monitored 55 providers with 63 projects in 127 counties across Texas. Of the 52 projects in fiscal year 2020 reporting on client service outcomes, the top categories with positive results were:

- Increased recovery and wellness of people served;
- Successful prevention of adverse events, such as jail, hospital, or emergency room use diversion;
- Improved autonomy for program participants; and
- Improved youth life experience in a school environment.

As projects closed out at the end of fiscal year 2020, Table 2 summarizes the 36,136 unduplicated people grantees served by project type.

Notable outcomes include:

- The majority of people were served by projects in counties with 250,000 or more residents (72 percent);
- Both access to care and crisis forensic projects served 30 percent of all people each, together representing two thirds of all people served across project types;
- Both access to care and crisis forensic projects served most people in counties with populations under 250,000 (25 percent) and in counties with 250,000 or more residents (46 percent); and
- Peer Support Services projects served people exclusively from counties with 250,000 or greater population (100 percent).

Other findings indicate: Co-Occurring and School-Based and Early Intervention projects met 215 percent of their expected total monthly participants across the fiscal year; and Peer Support Services projects served 149 percent of their original target.

Community Mental Health Grant Program Fiscal Year 2020 Key Accomplishments:

- 88 percent of youth in school-based programs achieved measurable improvement in prosocial academic domains (mental health/behavior, attendance, grades)
- 79 percent criminal justice diversion rate of program participants (individuals with behavioral health needs were diverted from incarceration and/or the criminal justice systems via coordinated assessment and intervention strategies)
- 73 percent of program participants achieved measurable improvement in health and wellbeing

Table 2. Number of Unduplicated People Served by Project Type and County Population in Fiscal Year 2020

Project Type	People Served In Counties <250,000	People Served In Counties 250,000+	Total People Served
Access to Care	6,815	5,295	12,110
Crisis & Forensic Services	2,517	8,985	11,502
School-Based & Early Intervention	455	7,921	8,376
Co-occurring Psychiatric & Substance Use Disorders	406	746	1,152
Peer Support Services	0*	2,996	2,996
TOTAL	10,193	25,943	36,136

*No Peer Support Services projects established in communities with a population less than 250,000

Healthy Community Collaboratives

The Healthy Community Collaboratives (HCC) program builds communities and collaboratives that bring together the public and private sector to support the ongoing recovery and housing stability of persons experiencing homelessness, or are at imminent risk of homelessness, with unmet behavioral health needs. HCC was originally established by Senate Bill 58, 83rd Legislature, Regular Session, 2013, by Senator Jane Nelson and later amended by Senate Bill 1849, 85th Legislature, Regular Session, 2017, by Senator John Whitmire, and House Bill 4468, 86th Legislature, Regular Session, 2019, by Representatives Garnet Coleman, Yvonne Davis, and Nicole Collier.

Through multi-system approaches, HCC was able to exceed the program goals of recovery and reintegration into the community as evidenced by a 28 percent reduction in crisis services and a 20 percent reduction in hospitalizations by program participants in fiscal year 2020. HCC served more than 30,000 unduplicated persons, diverted over 150 people from homelessness, and housed more than 3,700 participants in fiscal year 2020 in Austin, Dallas, Fort Worth, Houston, and San Antonio. HCC staff receive training in harm reduction, motivational interviewing, employment support, peer support, and permanent supportive housing.

Healthy Community Collaboratives Fiscal Year 2020 Key Accomplishments:

- More than 282,600 units of education and employment services filled critical employment needs
- More than 114,000 units of mental health treatment and more than 48,500 units of substance use disorder treatment filled behavioral health needs
- More than 23,500 coordinated assessments synchronized and maximized service resources



Learn more about behavioral health support in the community by watching this video at <https://bit.ly/BHSupportCommunity>

Mental Health Program for Justice Involved Individuals — SB 292-85R

The Mental Health Grant for Justice Involved Individuals Program aims to effectively address the unmet physical and behavioral health needs of individuals to prevent initial or subsequent justice involvement and promote recovery. Established by Senate Bill 292, 85th Legislature, Regular Session, 2017, by Senators Joan Huffman, Jane Nelson, and Charles Schwertner, the program supports community collaboratives which are working on reducing recidivism rates, arrests, and incarceration among individuals with mental illness, and/or reduce the wait time for forensic commitments.

In fiscal year 2020, 23 grantees operated 37 distinct projects across 45 counties, serving more than 49,000 people. Individually and collectively, services provided by Mental Health Grant for Justice Involved Individuals Program grantees generated notable impacts on individuals and communities across Texas.

Mental Health Program for Justice Involved Individuals Fiscal Year 2020 Key Accomplishments:

- Average recidivism rate of service recipients in justice-involvement diversion programming: 6 percent
- Strengthened access to care for special populations through community-based justice-involvement diversion programming for more than 5,900 people
- Increased access to behavioral health services in rural Texas counties for more than 5,000 people

Texas Veterans + Family Alliance Grant Program

The Texas Veterans + Family Alliance (TV+FA) Grant Program was created by Senate Bill 55, 84th Legislature, Regular Session, 2015, by Senator Jane Nelson, to improve the quality of life of Texas veterans and their families by supporting local communities across the state to expand availability and access to mental health treatment and services. Funds are intended to augment the work of the U.S. Veterans' Administration and be a catalyst for communities to develop and support collaborative relationships and coordinated service delivery systems which are operationally sustainable after the life of a grant project.

Seventy-four TV+FA grantees received more than \$46 million in state funding to operate mental-health supportive projects for veterans and their families since 2015. Table 3 provides an overview of program implementation, the number of grantees per phase of the program, and the total of state funding awarded during each phase.

In numbers, 56,976 veterans and family members received grant-supported services and treatments during the Pilot through Phase IV to date. Phase IV ends in August 2021. From inception of the pilot to the start of Phase IV, actual number of clients seen in every phase have surpassed projected target numbers.

Outcomes

The TV+FA grant program measures effectiveness by processes employed by grantees to track and record all clients who receive clinical and non-clinical mental health services and treatments within their community collaboratives. The TV+FA grant program has successfully increased the number of veterans and family members served per grant cycle every year since inception in 2015 (See Figure 5).

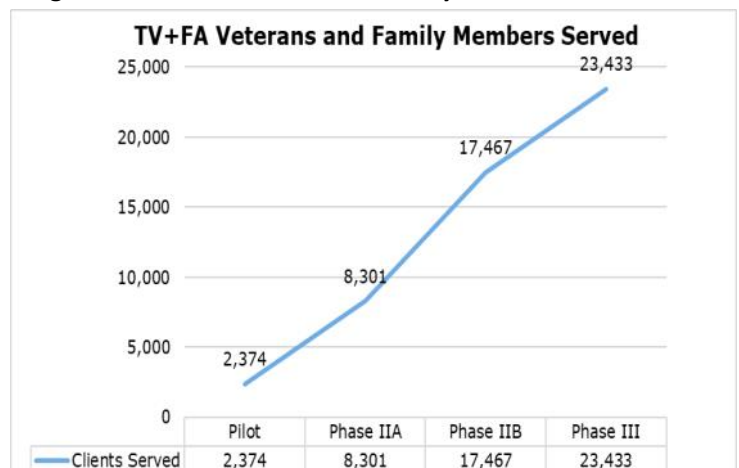
Notable fiscal year outputs of the TV+FA program include:

- 16 grantees operated programming across the state's 254 counties that served 5,401 Texans; and
- Provision of a diverse array of clinical and non-clinical services suited to meet the unique needs of veterans and their family members.

Table 3. TV+FA Grant Award by Grant Phase

Grant Phase	Grant Period	Number of Grants	Funding Awarded
Pilot	June 2016 - Aug 2018	5	\$1 million
Phase II-A	Nov 2016 - June 2018	13	\$6 million
Phase II-B	June 2017 - May 2019	20	\$10 million
Phase III	July 2018 - Dec 2019	20	\$9.3 million
Phase IV	Sept 2019 - Aug 2021	16	\$20 million
Total		74	\$46.3 million

Figure 5. TV+FA Veterans and Family Members Served



TV+FA Behavioral Health Strategic Plan

Goal Fiscal Year 2020 Outcomes:

- *Goal 1: Program and Service Delivery* — More than 11,000 Service Units including service navigation, referral, case management, and/or outreach and engagement
- *Goal 2: Program and Service Coordination* — 75 percent of grantees with programming that filled critical service gaps and strengthened access for special populations



Watch the TV+FA video at <https://bit.ly/TVFAGrantProgram> to learn more

Mental Health Program for Veterans

The Texas Health and Human Services Commission (HHSC) and the Texas Veterans Commission (TVC) coordinate to administer the Mental Health Program for Veterans (MHPV) per Texas Government Code Section 434.352. Services are implemented through HHSC contracts with the Texas Veterans Commission, local mental health and behavioral health authorities (LMHAs/LBHAs), and Texas A&M Health Science Center. The program includes:

- Training and technical assistance to PSCs and peers;
- Identification, training, and communication with community-based licensed mental health professionals, community-based organizations, and faith-based organizations;
- Coordination of services for Justice-Involved Veterans (see Table 4 for numbers served);
- Coordination for local delivery of Mental Health First Aid for Veterans (MHFA-V) training; and
- A women and rural veteran mental health initiative.

Rider 59 appropriated \$5 million per fiscal year of the biennium to administer the program.

Peer Service Coordinators

Peer Service Coordinators (PSCs) hired or contracted by LMHAs/LBHAs provide direct peer-to-peer services and engage service members, veterans, and their families (SMVF) who have experienced military-related trauma, are at risk for isolation from support services, and may not seek services through traditional channels. In fiscal year 2020, LMHAs and LBHAs reported PSCs and trained volunteer peers provided:

- 42,673 SMVF with peer-to-peer support services in a one-on-one setting;
- Peer support services to 21,923 SMVF in group settings;
- 18,464 referrals to veterans serving community organizations; and
- 5,925 referrals to culturally competent clinical mental health services.

Veteran Counselors

Veteran Counselors (VCs) provide direct mental health services and clinical treatments to SMVF for military-related trauma, have been certified by TVC in military informed care, and are certified in at least one of the modalities recommended by the VA to treat military related traumas. In fiscal year 2020, veteran counselors delivered 486 face-to-face or telephonic clinical services for military-related traumas which include:

- Military Sexual Trauma
- Post-Traumatic Stress Disorder
- Traumatic Brain Injury

Table 4. Fiscal Year 2020 Justice Involved Veteran Interventions

Intercept Point	Numbers Served
Initial Law Enforcement Interaction	1,238
Veteran Treatment Court	18,292
County Jail	3,981
State Jail, Prison, or Federal Prison	1,975
Probation/Parole	3,935
Total	29,421

Table 5. Number of SMVF Trained in Fiscal Year 2020

Training Curriculum	Numbers Trained
MVPN Basic Training	726
Suicide Awareness	1,535
MHFA-V	169
Total	2,430



IDD-BHS Team Members Paul Theobold (center), Commissioner Sonja Gaines, (on right) Jenna Heise, Lillian Nguyen, Dr. Courtney Harvey, and Tim Keesling meet with Texas Mayor and Governor's Challenge team members and federal representatives for the President's Roadmap to Empower Veterans and End a National Tragedy of Suicide (PREVENTS) Taskforce site visit on Sept. 24, 2019. Task Force members toured Texas and Virginia to learn about innovative work, technical components, and opportunities for suicide prevention among Veterans.

Exceeding Expectations

First Statewide IDD Strategic Plan

Texas identified the need for a *Statewide IDD Strategic Plan* to focus on the intellectual and developmental disability (IDD) system across the state. The strategic plan is an opportunity to build on the current strengths of the IDD system and identify points of collaboration to incorporate the expertise of existing systems resulting in more holistic services. The first *Statewide IDD Strategic Plan* creates a unified road map to improve services, systems, and policies in Texas in order to help HHSC develop new interventions, models of care and best practices to enhance quality of life for people with intellectual and developmental disabilities. The plan is scheduled to be released in January 2021, just in time for the 87th legislative session.

Find out more about stigma and mental health with this video at <https://bit.ly/stigmamentalhealth>



Mental Health First Aid Trainings

The Mental Health First Aid (MHFA) program provided training to 400 state employees and 19,246 instructors, public school employees, higher education employees, and community members in fiscal year 2020. MHFA is an eight-hour course which introduces participants to risk factors and warning signs of mental health and substance-use concerns and builds understanding of their impact and common treatments.

Due to COVID-19, the National Council for Behavioral Health created fully virtual MHFA courses, which allowed the local mental health and behavioral health authorities (LMHAs/LBHAs) to begin providing the virtual training in June 2020. As a result, the Texas Health and Human Services Commission (HHSC) anticipates the number of people trained will increase as awareness and availability of virtual MHFA training increases. Virtual MHFA will make training accessible to those who do not have access to the in-person training. As such, HHSC foresees MHFA training will return to pre-pandemic levels and surpass training numbers from previous years.

MentalHealthTX.org Redesign

The Statewide Behavioral Health Coordinating Council launched a newly redesigned Mental Health Texas website, www.mentalhealthtx.org, in August 2020 in more than 60 languages to provide more transparency on the Intellectual and Developmental Disability and Behavioral Health Services Department (IDD-BHS) services. Enhancements include:

- The website is a single one-stop shop which brings together helpful behavioral health services from across more than 20 state-funded agencies with other critical behavioral health resources.
- Through use of the service locator that pulls from 2-1-1 resources, people may find mental health and substance use disorder services, crisis hotline numbers, LMHAs, as well as information about common behavioral health conditions and social services.

- New features include information on the opioid epidemic, suicide, bipolar disorder, anxiety, psychosis, trauma, substance use, depression, and IDD.
- Content is now organized in a user-friendly format by population groups: children, teens, veterans, and seniors and includes a calendar (<https://mentalhealthtx.org/events/>) of behavioral health public events.

Fiscal year 2021 early website analytics indicate high traffic activity exceeding fiscal year 2020 stats including a 321 percent increase in new web visitors to the site with 16,747 page views, a hefty increase of 615 percent, between August 2020 and September 2020.



All Texas Access — SB 633-86R

Fiscal year 2020 saw major developments in the implementation of Senate Bill 633, 86th Legislature, Regular Session, 2019, by Senator Lois Kolkhorst, also known as All Texas Access. This project focuses on helping rural LMHAs plan for sharing resources and building capacity to provide access to needed services. Through team efforts, seven regional groups were created, loosely aligned with the catchment areas of the Austin, Big Spring, Rio Grande, Rusk, San Antonio, and Terrell state hospitals.

Read the *All Texas Access Report* at <http://bit.ly/AllTexasAccess>



LMHA members of the All Texas Access San Antonio State Hospital Regional Group discuss their system map in completing their regional plan for Senate Bill 633-86R implementation.

IDD-BHS worked with each of these All Texas Access Regional Groups to develop mental health services development plans for each regional group focused on increasing the capacity of each group's member LMHAs/LBHAs to provide access to mental health services. Each mental health services development plan focuses on reducing:

1. Local government's costs for mental health crisis services;
2. The transportation of persons served by an LMHA in the regional group to mental health facilities;
3. Incarceration of people with mental illness in county jails within the regional group; and
4. The number of hospital emergency room visits in the regional group by people with mental illness.

The project work started in the Summer 2019 with IDD-BHS conducting several in person meetings with the regional groups along with focus groups in various parts of the state. With advent of the COVID-19 pandemic, IDD-BHS shifted to remote work and exercised social distancing through telephonic and virtual meetings.

IDD-BHS Highest Contract Execution Rate

IDD-BHS achieved a contract execution rate of 97 percent at the end of fiscal year 2020, its highest contract execution rate since transformation. The bulk of these actions occurred between March 1, 2020, and Sept. 1, 2020, and include fiscal year 2020 amendments, fiscal year 2021 renewals, and new contracts from six procurements.

The contract development process always requires coordination and collaboration with many key internal and external stakeholders. Behavioral Health Services team members played a significant role in the execution of contract related deliverables related to access to substance use services by arranging meetings to discuss, problem solve, and strategize all activities associated with multiple procurements. This involved crafting procurement documents, developing statements of work, and creating funding methodologies. IDD-BHS Contract Operations staff worked with program services subject matter experts, IDD-BHS Business Operations, Health and Human Services (HHS) Legal Services, HHS Purchasing and Contract Services (PCS) purchasers, and other agency staff to process approximately 1,730 contract actions during fiscal year 2020.

Continuum of Care Workgroup

In Fall 2018, IDD-BHS, Health and Specialty Care System (HSCS), Medicaid and Children's Health Insurance Program Services, HHS Regulatory, and HHS Office of Aging Coordination partnered to form a collaborative workgroup focused on generating strategies to improve the clients' transition in and out of the state hospitals, including the array of supports provided by LMHAs/LBHAs for people with behavioral health needs and service coordination.

The workgroup's initial objectives included ensuring effective and efficient communication and coordination between state hospitals and LMHAs/LBHAs in order to provide seamless care; identifying gaps and barriers to continuity of care specifically, to successful discharge from state hospitals; and identifying short- and long-term goals to address identified gaps and barriers.

Some keynote workgroup accomplishments to date include:

- Transitioning of 31 state hospital patients diagnosed with IDD hospitalized for more than one year and ready for discharge to a less restrictive setting in the community.
- Establishment of collaborative clinical review teams by state hospitals for complex inpatients hospitalized more than 365 days and who no longer meet medical necessity for an inpatient level of care.
- Initiation of a furlough pilot program by HSCS and IDD-BHS for people discharging from state hospitals into community-based care under the Home and Community-based Services - Adult Mental Health program (HCBS-AMH).
- Adoption of revisions to LMHA Admission, Continuity, and Discharge Responsibilities, Texas Administrative Code, Title 25, Chapter 412. Revisions cover state hospitals and private psychiatric beds, forensic services, and also include specificity regarding roles and responsibilities for ensuring smooth transitions between acute inpatient and community-based care.

Office of Decision Support Data Access Improvement with Tableau Dashboard

In an effort to improve efficiencies and the capacity and ease for presenting data, Office of Decision Support (ODS) implemented the Tableau Dashboard, which enables use of report data to develop dashboards for publication on the HHSC Shared Services server for customer use. Dashboards provide a more dynamic method of utilizing multiple sources of data and displaying in a single dashboard. ODS saw the need and created efficiencies through use of Tableau Dashboard to include:

- Use of dashboards provide common reports and data requested on a regular basis;
- Stakeholders can self-service their data needs.
- Reporting consistency;
- Use of combined data sets with drill down options; and
- Ease of access to the data.

Major milestones for the ODS team since beginning the Tableau dashboard project in May 2020 include: identifying team members and establishing the team, developing processes and procedures, establishing the shared services server, conducting overview sessions with stakeholders, convening stakeholder requirements meetings, and publishing numerous dashboards.

National Suicide Prevention Lifeline Grant

The Office of Mental Health Coordination looked for opportunities in fiscal year 2020 to enhance the department's work in support of suicide prevention. The team received a new \$3 million, two-year grant from the National Suicide Prevention Lifeline. The grant will increase HHSC's capacity to provide free, confidential, emotional support and services to people in suicidal crisis or emotional distress, raising the in-state answer rate for Lifeline calls to 70 percent from a current in-state answer rate of approximately 31 percent. HHSC contracted with four LMHAs authorities to implement the grant in March 2020: The Harris Center for Mental Health and IDD, Integral Care (Travis County), My Health My Resources of Tarrant County, and Emergence Health Network (El Paso County).

Virtual Reality Pilot Project

The IDD-BHS Special Projects team used its creativity in fiscal year 2020 to better the lives of individuals with an intellectual and developmental disability. Transition from a state supported living center (SSLC) to a community-based setting can be a difficult experience for individuals with an intellectual and developmental disability. To ease the stress associated with this transition, the IDD-BHS Special Projects Unit initiated a new pilot project called "Take Me There." The project utilizes virtual reality (VR) technology to familiarize individuals with their new surroundings prior to their move.



Left: Shirley West, formerly of Austin SSLC, captures 3-D footage of a home in Pflugerville for use in the "Take Me There" VR Project. Right: An Austin SSLC resident tries out the VR tour to provide valuable feedback on the experience.

Work on the project began in Fall 2019 with a proposal to the Centers for Medicare and Medicaid Services for Money Follows the Person funding to pilot the VR headsets at SSLCs. The initial pilot included two SSLCs – Brenham and Austin. To train SSLC staff on the VR equipment, a training manual and accompanying video were produced to maintain HHS safety precautions required during COVID-19. IDD-BHS Special Projects was recently granted funding to purchase additional VR headsets. In response, 11 more SSLCs will have the opportunity to provide pre-transition assistance in Winter 2020 and Spring 2021.

Learn more about Transitioning from a State Supported Living Center into the community with this video at <https://bit.ly/SSLCtoCommunity>



Substance Use Disorder Treatment Expansion — Rider 64-86R

The 2019-2020 General Appropriations Act, House Bill 1, 86th Legislature, Regular Session, 2019 (Article II, HHSC, Rider 64) appropriated \$23,634,844 in general revenue funds for fiscal year 2020 to reduce the substance use treatment waitlist for pregnant women and women with dependent children including:

- Approximately \$5.3 million of funding was used to amend contracts with approximately 80 percent of substance use disorder treatment providers serving pregnant women and women with dependent children

to expand the state-funded treatment capacity for pregnant women and women with dependent children.

- \$3 million of funding was designated to create a new substance use

intervention service, known as Comprehensive Continuum of Care (CCC), which includes comprehensive case management, community-based linkages, and retention services through pre-admission service coordination. CCC is designed to reduce barriers to treatment, enhance motivation, stabilize life situations, and facilitate engagement in substance use disorder treatment.

- To further expand services to women who are pregnant or have dependent children and have been diagnosed with a substance use disorder, funds were used to establish the Casa Mia program to help build physical infrastructure for a recovery residence with a specialized nursery for pregnant and postpartum women and their infants. This startup capital was used to support the recovery residence and nursery, while the facility explored further licensing. Casa Mia expects to become self-sustaining through Medicaid reimbursements and alternate funding sources by the end of calendar year 2021.



See the Behavioral Health Treatment

for Mothers video

at <https://bit.ly/BHTreatmentMothers>

Behavioral Health Services Grant Awards

Of major significance for our substance use program and client services, Behavioral Health Services secured a two-year, \$104 million State Opioid Response 2020 grant from the federal Substance Abuse and Mental Health Services Administration. This funding allows HHSC to continue its work to increase access to medication assisted treatment (MAT) and reduce opioid overdose-related deaths through prevention and recovery activities. By using a “whole-patient” approach to opioid use disorder treatment, HHSC will help more people and families negatively impacted by opioids.

With the 86th Legislature’s dedication to combat substance use, HHSC used appropriated funding, including Rider 64 funds, to award nearly \$125 million in substance use disorder treatment grants to 100 awardees to provide prevention, intervention, and treatment services for individuals at-risk for substance use disorders. Grants are funded for five fiscal years, beginning Sept. 1, 2020, through Aug. 31, 2025. Funding is used for treatment for nearly 49,000 adults and youth in need annually, including people experiencing psychiatric and substance use disorders. Services include ambulatory detoxification, residential and outpatient treatment services, women and children’s intensive and supportive residential programs, and resources for persons with substance use and mental health issues.

Employment First

Another highlight in fiscal year 2020 for the IDD-BHS Special Projects team is the refresh of the *HHS Employment Guide for People with Disabilities* (<https://bit.ly/UpdatesDisabilityEmploymentGuide>). Highlights include recommended roles and responsibilities during each stage of a job search, strategies for overcoming transportation obstacles, and guidance for coordinating services with Texas Workforce Commission – Vocational Rehabilitation Services.

Employment for People with Disabilities – What You Need to Know (<https://bit.ly/PeopleWithDisabilitiesEmploymentGuide>) is a new brochure that explains and defines employment first, describes the employment services offered through HHS programs, and how going to work may affect Social Security benefits and health care coverage.



Learn more about hiring people with disabilities through this

video at <https://bit.ly/HiringPeopleDisabilities>

Process Improvements

Outpatient Mental Health Pilot

Individuals with intellectual and developmental disabilities (IDD) and a co-occurring mental health conditions face many challenges with one of the biggest being long-term integration into a community setting. To address the challenges and better serve the community, IDD Services used fiscal year 2020 to plan an IDD Mental Health pilot with implementation slated for fiscal year 2021.

Created from a \$3 million legislative appropriation for the 2020-21 biennium, the pilot will provide outpatient mental health services to help individuals cope with stressors and manage their mental health after integrating into the community.

IDD Services utilized a two-phase approach to implementation. Funded within fiscal year 2020, Phase I involved the creation of a Learning Collaborative comprised of local intellectual and developmental and disability authorities (LIDDAs). The Learning Collaborative advised the Texas Health and Human Services Commission (HHSC) on best-practice models of services and associated outcome measures with demonstrated success providing outpatient mental health services for people with IDD.

Phase II involves the pilot implementation, slated for the start of fiscal year 2021. Five LIDDAs – Bluebonnet Trails, Integral Care, Lakes Regional Community Center, My Health My Resources of Tarrant County, and The Harris Center for Mental Health and IDD – will provide collaborative care service delivery of physical and behavioral health services aimed at preventing or reducing crisis situations.



Watch the Assistance in the Community for Complex Medical Needs video at <https://bit.ly/ComplexMedicalNeeds>

Measure Up

The Texas Health and Human Services Commission (HHSC) administers close to \$100 million in matching grant programs. In an effort to demonstrate the outcomes associated with the matching grant programs, the Measure Up project was established. The main goals of the Measure Up project are to:

- Build upon currently working measurement strategies;
- Allow grantees to select relevant project outcomes;
- Standardize outputs, measurement tools, and methodology to ensure consistent reporting; and
- Ensure information can be aggregated and contextualized to represent overall improvement and tell a meaningful story to funders at local and state levels.

Roll out of the performance measures began in fiscal year 2020 with the Community Mental Health Program. The Mental Health Grant Program for Justice Involved Individuals, Healthy Community

Measure Up Fiscal Year 2020

Accomplishments:

- Development and vetting of performance measure constructs, including subject matter experts review and input;
- Research and approval of selected assessment tools;
- Implementation planning and measure selection for the Community Mental Health Grant Program; and
- Approval of the performance measure menu by Behavioral Health Services Leadership.

Collaboratives (HCC), and Texas Veterans + Family Alliance (TV+FA) grant programs performance measures to follow in fiscal years 2021-2022. Roll out activities include training grantees on new measures (including recommended tools) and establishing an online data collection mechanism for quarterly reporting.

IDD-BHS Contract Operations Centralization

In support of the Intellectual and Developmental Disability and Behavioral Health Services Department (IDD-BHS) fiscal year 2020 goal to enhance organizational structure functional alignment across the department, the contract centralization initiative resulted in a revised Contract Operations alignment consisting of five units: IDD Contracts, Mental Health Contracts, Substance Use Disorder Contracts, Quality Management, and Operations. More than 100 staff were brought together to perform contract work and assume responsibility for approximately 1,200 contracts valued at more than \$1.1 billion.

Amid the pandemic, IDD-BHS Contract Operations filled multiple vacancies and trained additional staff on the new Health and Human Services (HHS) Procurement and Contracting Services (PCS) streamlined contracting process. The section vacancies decreased from 25.5 positions in September 2019 to 15 positions in August 2020.

Over the last year, IDD-BHS Contract Operations has also continued to promote efficiencies and enhance continuity across the section through refined, improved, or established internal procedures; increased collaboration and consistency across units; improvements to Quality Management processes, procedures and tools; application enhancements; and expanded information sharing. Some of which include:

- Reducing the number of contract renewal actions by implementing a standard 5-year contract term in most cases;
- Implementing a boilerplate contract approval process to streamline contract approval and execution cycles;
- Implementing an improved workplan to document timely completion of required contract development steps;
- Developing and implementing a requisition and contract entry support template that enhanced staff training, efficiency and accuracy;
- Implementing thorough quality assurance review of contract documents and associated funding rosters to prevent errors and ensure efficient approval;
- Implementing an internal Standard Operating Procedures and Policies Project delivered in a three-part training series (including new hires); and
- Staggering procurements to ensure no more than two complex procurements within a program area are conducted in a single fiscal year.

Behavioral Health Services

Organizational Improvements

Behavioral Health Services positioned itself to stay on trend with efficient and effective programs right down to its very structure with organizational improvements in fiscal year 2020. Notable changes include the creation or refinement of new areas within Behavioral Health Services. Among these are:

- Enhancing how services are delivered in the state with the new Peer Services unit;
- Aligning Adult and Children's Services together under the Mental Health unit; and
- Enhancing the Substance Use Disorder unit with a new Prevention Services area for greater visibility.



IDD-BHS leadership team members pose for a group picture at the fall retreat on Oct. 29, 2019, after a discussion on department successes and fiscal year 2020 projects and goals.

More than 100 IDD-BHS
Contract Operations
team members
came together
to assume responsibility
for approximately
1,200 contracts valued
at more than \$1.1 billion

PASRR Merger

To create efficiencies and enhance client services, the IDD Services Pre-Admission Screening and Resident Review (PASRR) unit reorganized to include both PASRR IDD and PASRR Mental Illness (MI) staff. With the consolidation, the following accomplishments occurred:

- Overall improvement in the collaborative effort related to PASRR;
- PASRR Technical Assistance – all PASRR questions now go to one PASRR Support mailbox;
- One website for IDD and MI PASRR;
- Policy and Procedures include both IDD and MI PASRR;
- One broadcast that addresses both IDD and MI PASRR when appropriate;
- More support and guidance from Leadership;
- The release of the MI PASRR Handbook;
- Quality Monitoring PASRR team now reviewing for PASRR MI requirements; and
- Rule workgroup now includes a MH PASRR team member.



Find out more about

the PASRR process and benefits with these videos at

<https://bit.ly/PASRRProcess> and <https://bit.ly/PASRRBenefit>

Department Vacancy Rate All-Time Low

Intensive efforts by IDD-BHS leadership made a significant impact on reducing the department's vacancy rate. In fiscal year 2020, the IDD-BHS vacancy rate reached an all-time low of 8 percent for the first time in May 2020, a significant improvement from the 19 percent rate seen September 2019, the beginning of the fiscal year. The department finished 2020 maintaining low vacancies and has an 8 percent rate as of November 2020. It's been truly a collective effort to recruit and hire sufficient personnel, especially during this pandemic.

IDD-BHS Budget Initiatives

Another fiscal year has come and gone, and fiscal year 2020 was an exciting year for the "balance sheet." In preliminary financial reporting, the goals of "right-fitting" LIDDA funding allocations paid dividends in averting administrative burden on the IDD-BHS Contract Operations unit in issuing contract amendments and ensured the continuity of client services. Additionally, the IDD-BHS Business Operations team directly supported funding for new crisis outpatient services and information technology projects.

In preparation for fiscal year 2020, Business Operations led the new IDD-BHS program allocation methodologies implementation which better aligned BHS funding with poverty, population, and specific needs-related variables to improve funding allocations statewide. This new approach ensured Texans could access programs with adequate funding to meet their needs and support them with appropriate resources.

The IDD-BHS Business Operations team also solved several critical financial challenges during fiscal year 2020, including developing a solution for Rider 64-86R substance use disorder funding, developing a \$5 million increase in substance use disorder funding related to procurement challenges, and ensuring Texans had full access to mental health resources during the COVID-19 pandemic.

In support of the Office of Mental Health Coordination, the IDD-BHS Business Operations team contributed to successful publication in July 2020 of the fiscal year 2021 *Statewide Behavioral Health Coordinated Expenditure Proposal*, a \$3.83 billion catalogue of all behavioral health programs across more than 23 different Texas state agencies. This publication informs the public and the Legislature on all the good work the state does in supporting behavioral health for Texans.



Employee Engagement

Survey of Employee Engagement Results

The Intellectual and Developmental Disability and Behavioral Health Services Department (IDD-BHS) achieved an 84 percent participation rate in the 2020 Survey of Employee Engagement (SEE), a vast improvement over the 2018 participation rate of 68 percent. Regarding the SEE overall scores, in fiscal year 2020, IDD-BHS staff reported a higher satisfaction on constructs such as supervision, employee development, sense of community and workgroup among others. Results for 2020 also showed close to 90 percent of our teams reported being engaged vs. 68 percent in 2018, a tremendous turnaround in a two-year span. Table 6 below is a results summary reflecting the IDD-BHS survey results in comparison to the Texas Health and Human Services Commission (HHSC) as a whole:

Table 6. 2020 HHSC Employee Engagement Survey Results Summary

Agency/Department	Respondents		Response Rate		SEE Overall Score		Staff Disengaged	
	2018	2020	2018	2020	2018	2020	2018	2020
HHSC	16,526	13,311	46.5%	37%	355	371	20%	16%
IDD-BHS	183	329	68%	84%	328	382	32%	11%

The IDD-BHS Beat Department Newsletter

With the launch of the IDD-BHS monthly newsletter, *The IDD-BHS Beat*, more than 400 IDD-BHS team members were kept informed on key happenings and occurrences across the department. Through this communication tool, team members are introduced to new hires, learn about program updates and new services, and hear from department leadership. This past year was busy producing and timely distributing a full 12 monthly issues of information across the department.

137 new employees attended new employee orientation which transitioned to virtual trainings in May

New Employee Orientation

Established in 2018, New Employee Orientation (NEO) provides incoming IDD-BHS team members with an overview of agency and department operations. Designed to help foster a common understanding and culture NEO underwent several changes in 2020. Staff updated the NEO orientation handbook in the fall, including revised descriptions of all IDD-BHS sections. In addition, the in-person orientation also underwent changes. While providing a full year of NEOs, training 137 new employees in fiscal year 2020, NEO format was changed with a transition to virtual trainings beginning in May. In addition, NEO now incorporates a half day training focused on trauma informed care and peer and recovery-oriented care.

Staff Advisory Panel

Comprised of non-managerial/supervisory team members representing all IDD-BHS areas, the IDD-BHS Staff Advisory Panel members serve as a liaison between other team members and the committee. This includes sharing committee updates with team members and bringing forward topics of innovation and concern. In 2020, the Staff Advisory Panel worked on annual staff and team recognition awards, addressed issues related to team morale, and welcomed several new members.