



Texas System of Care

Achieving Well-Being for Children and Youth

STRATEGIC PLAN

2017 - 2021

VISION

All Texas children and youth have access to high quality mental health care that is family-driven, youth-guided, community-based, culturally-grounded and sustainable.



MISSION

To strengthen the collaboration of state and local efforts to weave mental health supports and services into seamless systems of care for children, youth and their families.

Development of this document was supported by the Substance Abuse and Mental Health Services Administration under Award Number # SM060659 and Award Number # SM061219. The content is solely the responsibility of the authors and does not necessarily represent the official views of the Substance Abuse and Mental Health Services Administration or the Department of Health and Human Services.

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Acknowledgments

Many individuals and organizations have given unselfishly of their time and expertise to ensure that this plan will be an effective roadmap to improved outcomes for Texas children and youth with serious mental health challenges and their families. We are particularly grateful to the families and youth who have shared their struggles and hopes for the service system and provided a voice for other youth and families. We are also grateful to the leaders of Texas child and youth-serving systems, including community leaders with many years of experience with system of care development, who took time away from the exceptional demands of their jobs to contribute to the strategic planning activities. The insights and innovative ideas shared by dedicated individuals have been woven into the goals strategies that make up the plan. This renewed commitment on the part of leaders, policy makers, families, youth, and advocates has generated excitement throughout the network of system of care sites in Texas, and we are indebted to everyone who has participated in this effort on behalf of Texas children, youth and their families.

Introduction

In October 2011, Texas received a Children's Mental Health Initiative planning grant from the Substance Abuse Mental Health Services Administration (SAMHSA) to plan for the statewide expansion of the system of care framework for children and youth with serious emotional disturbances (SED) and their families. The planning initiative, Achieving Successful Systems Enriching Texas (ASSET), was overseen by the ASSET Steering Team, which consisted of family and youth representatives, advocates, and representatives of state and local child-serving agencies. This planning initiative builds on previous efforts to improve services and supports available to children and youth with mental health challenges in Texas and incorporates the lessons learned from six diverse communities in the state that received federal cooperative agreements to develop local systems of care.

In June 2013, Texas received a Children's Mental Health Initiative cooperative agreement from SAMHSA to implement the 2012-2017 Strategic Plan. During this grant, many objectives from the plan were successfully achieved. Examples of key accomplishments include the statewide expansion of the Youth Empowerment Services 1915(c) Medicaid Home and Community Based Waiver, the statewide expansion of access to wraparound planning for children and families, the establishment of the Texas Family Voice Network (TFVN), the establishment of the Allies Cultivating Change by Empowering Successful Transformation (ACCEPT), and the addition of sixteen new counties within the System of Care family.

History of Texas's Steps to a System of Care

Texas made an early commitment to system of care values and principles and has made steady progress over the past 15 years.

Key milestones include:

1987 - Establishment of Community Resource Coordination Groups (CRCGs), county-based interagency service-planning teams created in statute - CRCGs are now available statewide.

1993 - The Texas Federation of Families for Children's Mental Health was awarded their first statewide family network grant from SAMHSA.

1996 - First formal system of care efforts in the state begin through a Robert Wood Johnson (RWJ) Foundation grant to the Texas Health and Human Services Commission (HHSC) and the Texas Department of State Health Services (DSHS).

1998 - SAMHSA awards a multi-year cooperative agreement to HHSC, in collaboration with the Travis County Children's Partnership, to continue efforts started through the RWJ Foundation grant.

1999 - The 76th Texas Legislature creates the Texas Integrated Funding initiative (TIFI) to develop local systems of care for children and youth and provides funding for four TIFI sites.

2002 - The city of Fort Worth and El Paso County are each awarded multi-year SAMHSA cooperative agreements.

2005 - Texas receives a SAMHSA Mental Health Transformation (MHT) Grant. Outcomes of transformation activities are detailed at <http://www.mhtransformation.org>, including the report *Coordinated Funding for Children with Serious Emotional Disturbance: Current Funding, Services and Recommendations*.

2005 - Harris County (Houston) is awarded a six-year SAMHSA cooperative agreement.

2008 - Texas publishes the TIFI Financing Field Guide for community stakeholders to examine the financing of children's mental health services and supports.

2008 - Tarrant County and four surrounding counties were awarded a SAMHSA cooperative agreement focused on children birth to age six. The Rural Children's Initiative, eleven rural and frontier counties in the Texas panhandle, was also awarded a multi-year SAMHSA cooperative agreement.

2009 - Texas received approval for a Home and Community-Based Medicaid 1915c waiver, named Youth Empowerment Services (YES), targeting children and youth with serious mental health needs.

2011 - SAMHSA awards a one-year planning grant to HHSC for the expansion of statewide systems of care for children with serious mental health needs.

2011 - Texas establishes a statewide approach to training and coaching to ensure access to high-quality wraparound for children and youth with mental health challenges who are involved with multiple agencies.

2011 - The first cohort of family partners (family peer support) are certified through Via Hope.

2012 - The Texas Institute for Excellence in Mental Health is established at the University of Texas at Austin and serves as a resource for system of care expansion, including workforce training, technical assistance, and accountability.

2013 - SAMHSA awards a four-year implementation grant to HHSC for the expansion of statewide systems of care for children with serious mental health needs.

2015 - DSHS and HHSC began statewide expansion of the Youth Empowerment (YES) Waiver for children and youth at risk of out-of-home placement due to serious emotional disturbance.

Process for Building the Initial Strategic Plan

The initial System of Care strategic planning activities occurred in three phases – document review, stakeholder information gathering, and facilitated planning. The three phases are not distinct, but rather inform and enhance each other. The update of the strategic plan in 2016 involved each of these processes as well.

Document review

The initial document review phase consisted of the review and synthesis of existing reports and documents from national, state and local sources. Strategic plans from state child-serving agencies, community system of care sites, and other state systems were gathered and reviewed. Numerous studies and reports have been completed over the last ten years with valuable information and recommendations related to children's mental health systems. Other key resources included a state-level strategic plan developed for children with special health care needs, legislative recommendations by the state-level children's council, and national resources for system of care.

In addition, the initial planning team assessed community-level readiness through a survey of webinar participants and, more specifically, through a survey of communities responding to the Request for Interest (RFI) to participate in SOC expansion. These surveys have provided valuable information about readiness across state agencies, readiness across all Texas communities, and the strengths and needs within communities at varying stages of SOC implementation.

Stakeholder information gathering

The ASSET team has utilized multiple strategies for gathering information from stakeholders on key needs, barriers and opportunities throughout the state. The team has conducted an assessment of state-level readiness for system of care expansion through a survey of stakeholders within state agencies, advocacy organizations, parents and youth. Key informant interviews have been conducted with leadership at child-serving agencies and with key partners in select areas, such as Medicaid and adolescent health. Interviews have also been conducted with leaders at consumer advocacy groups, such as Alamo Area Youth M.O.V.E., the Texas Federation of Families for Children's Mental Health, the National Alliance on Mental Illness of Texas, Mental Health America-Texas, and Texans Care for Children. The team has also drawn from other concurrent stakeholder input opportunities, including regional youth meetings conducted by Via Hope and public meetings to gather input for Rider 71, a legislatively-mandated study of the public behavioral health system. In addition, youth with lived experience have facilitated focus groups of youth residing in juvenile correctional facilities.

Another strategy for information gathering and strategy identification has been to utilize the experience of three ASSET expansion communities interested in developing or enhancing their local system of care. These communities, at various stages of system of care implementation, were selected through a competitive process. The lessons learned through each community's experience with system of care expansion have contributed to identifying local needs and effective strategies for supporting system of care expansion to additional communities.

Facilitated planning

Throughout the process, the strategic plan has been developed through facilitated planning with the ASSET Steering Team and other key stakeholders. The ASSET team has utilized a number of tools and strategies to reach consensus on mission, vision, goals and strategies within the plan. These tools have included web-based surveys, paper-and-pencil surveys, and facilitated discussions. Some

goal areas have also formed workgroups to enhance planning for specific areas, such as leadership, social marketing, family and youth voice, training, and accountability. The ASSET Steering Team has participated in quarterly meetings, during which participants have developed key components of the strategic plan.

Process for Updating the Strategic Plan

The current version of the Texas System of Care Strategic Plan builds upon the strategic plan developed for 2012-2017. Project staff began by reviewing records of accomplishments maintained throughout the implementation phase. Strategies from the plan that were fully completed were removed. Facilitated planning sessions to determine additional areas of focus were conducted within the Child and Youth Behavioral Health Subcommittee and the Texas Family Voice Network. This information was then used to inform the development of specific strategies and action steps through the development of workgroups focused on each goal area. Stakeholders met to review the ideas generated by earlier discussions, modify goals, strategies, and action steps to reflect current progress, and identify new activities to meet the goals and advance and sustain the system of care.

Overview of Planning Goals and Key Strategies

The strategic plan is based on five broad goals and their associated strategies and action steps (*see also Figure 1.*). The time frame for completing the strategy is indicated with **short-term** reflecting one to two years and **long-term** reflecting three to five years.

The five broad goal areas are:

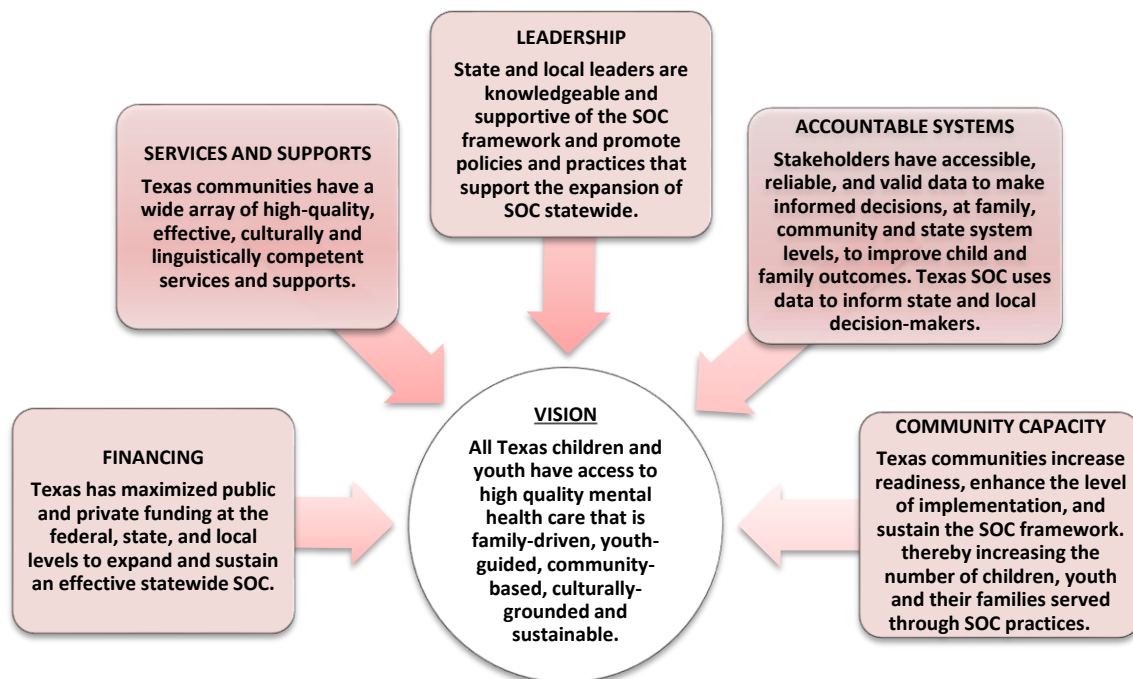
- 1) Develop and Strengthen Leadership and Support: State and local leaders are knowledgeable and supportive of the system of care framework and promote policies and practices that support the expansion of system of care statewide. The on-going development of a strong state and local infrastructure is key to the advancement of a state and community system of care.
- 2) Enhance Access to Effective Services and Supports: Texas communities have a wide array of high-quality, effective, culturally and linguistically competent services and supports. Coordination of services across multiple systems, access to non-traditional services and supports, and effective youth-centered and family-driven planning processes are critical to a strong system of care.
- 3) Support Community Development of System of Care: Texas communities increase readiness, enhance the level of implementation, and sustain the system of care framework, thereby increasing the number of children, youth and their families served through system of care practices. There have been six federally-supported system of care communities, six state-supported system of care communities and most recently three ASSET system of care expansion communities. These communities have helped inform a statewide approach to continue to grow system of care in additional Texas communities.
- 4) Maximize Efficient, Sustainable Financing Strategies: Texas has maximized public and private funding at the federal, state, and local levels to expand and sustain an effective statewide system of care. Aligning financing with system of care practices is critical to supporting

infrastructure, expanding access to effective services and supports, sustainability and resource coordination.

- 5) **Create Accountable Systems:** Stakeholders have accessible, reliable, and valid data to make informed decisions, at family, community, and state system levels, to improve child and family outcomes. Accessible data allows systems to identify needs, plan appropriately, allocate resources, and evaluate activities in support of effective systems of care.

Creating a Foundation for Success: Building Blocks of the Plan

Figure 1.



Strategic Partners

The development of this strategic plan required time, commitment and hard work from many individuals and organizations. This document reflects the best thinking of many dedicated, creative individuals. These partnerships set the stage for implementation of this plan and the expansion of system of care within Texas.

- [Children and Youth Behavioral Health Subcommittee \(CYBHS\)](#) - The CYBHS (formerly the Texas System of Care Consortium) has provided oversight to the implementation of system of care in Texas. Membership includes youth, family, community and state partners (see Attachment A for membership).
- [Texas System of Care Communities](#) – Texas System of Care Communities include those that have received federal funds to support and sustain their system of care development, including the four communities supported under the initial Texas System of Care expansion

award, and communities that have established system of care frameworks without federal or state financial support.

- [Texas Health and Human Services Commission \(HHSC\)](#) – Housing Behavioral Health Services and the Medicaid Office, this agency serves as the ‘umbrella’ agency that assists with interagency coordination among four health and human services departments. This agency also oversees mental health and substance abuse programs in Texas. Staff in HHSC's Office of Mental Health Coordination serve in a leadership role to promote interagency coordination in the planning and implementation of system of care in Texas.
 - [Texas Department of State Health Services \(DSHS\)](#) – This agency oversees public health and the Office of Title V Maternal and Child Health.
 - [Texas Department of Family and Protective Services \(DFPS\)](#) - This agency provides oversight to child and adult welfare, including foster care, child-care licensing and prevention and early intervention child abuse initiatives.
 - [Texas Department of Aging and Disability Services \(DADS\)](#) - This agency oversees regulatory programs and management of the operations for state supported living centers.
- [The Texas Institute for Excellence in Mental Health](#) at the University of Texas at Austin - This institute provides technical assistance and training to programs and initiatives focused on evidenced-informed and promising practices for children, youth and adults in Texas and serves in a key role in supporting implementation of system of care in Texas.
- [The Texas Family Voice Network](#) (TxFVN) is a group of family leaders who provide a unified, collective voice for families of youth with mental health needs from across Texas. TxFVN is an advisory group to the Texas System of Care Consortium, and works to expand the System of Care framework by strengthening statewide family voice.
- [Allies Cultivating Change through Positive Transformation](#) (ACCEPT), a state chapter of Youth M.O.V.E., is a cross-system group of youth and young adults ages 13-25 from across Texas who use their lived experience and expertise to help inform and drive system improvements. ACCEPT advocates for embracing youth voice in meaningful, authentic ways.
- [Via Hope](#) - A training and technical assistance resource center in Texas supporting individuals in recovery from mental illness, their family members, youth who are interested in mental health, and mental health professionals.
- [Hogg Foundation for Mental Health](#) - A philanthropic foundation that provides grants and scholarships to promote mental health in Texas.
- [Texans Care for Children](#) - An advocacy organization that has identified mental health as one of their top priorities and also facilitates a monthly forum on children’s mental health issues.
- [Texas Federation of Families for Children’s Mental Health \(TxFFCMH\)](#) - TxFFCMH is an advocacy organization that supports families of children and youth with mental health challenges and organizes an annual event, Guadapalooza, to raise awareness to assist with supporting families and youth.
- [Center for the Elimination of Disproportionality and Disparity \(CEDD\)](#) - The Center was created by statute to help address disproportionality and disparities in Texas health and human services, including children and youth with mental health needs that cross multiple systems.
- [Behavioral Health Advisory Committee \(BHAC\)](#) - The purpose of the BHAC is to provide customer/consumer and stakeholder input to the Health and Human Services system in the form of recommendations regarding the allocation and adequacy of behavioral health

services and programs within the State of Texas. The BHAC considers and makes recommendations to the HHS Executive Commissioner consistent with the committee's purpose.

- [Mental Health America of Texas \(MHAT\)](#) - This mental health advocacy and education agency facilitates support to a variety of programs and initiatives that address child and youth mental health, including suicide prevention.
 - [National Alliance on Mental Illness Texas \(NAMI\)](#) - This is a non-profit organization with about 45 local affiliates around Texas that strive to improve the lives of persons affected by mental illness.
 - [Texas LAUNCH](#) - This statewide, collaborative effort aims to strengthen Texas' system of services for young children and families so that all children enter school healthy and ready to learn.
 - [Texas Children Recovering from Trauma](#) - The goal of the Texas Children Recovering from Trauma (TCRFT) is to transform behavioral health services into a trauma-informed care system that fosters resilience and recovery. TCRFT is governed by the Child and Youth Behavioral Health Subcommittee.
 - [Alliance for Adolescent Recovery and Treatment in Texas \(AART-TX\)](#) – AART-TX is developing a 3-year strategic plan to improve treatment access, services, and outcomes for Texas youth between the ages of 12 and 18 who have been diagnosed with substance use disorders and/or co-occurring mental health disorders.
 - [Texas Home Visiting Program](#) - This is a Maternal and Child Health funded initiative aimed to support the development and implementation of home visiting programs in communities across Texas. It also contributes to the development of a comprehensive early childhood system that promotes maternal, infant, and early childhood health, safety, and development, and strong parent-child relationships in selected communities.
 - [First 3 Years](#) – First 3 Years is a non-profit affiliate of the World Association for Infant Mental Health and oversees endorsements in infant mental health.
 - [Texas Education Agency \(TEA\)](#) - This is the central agency that provides oversight to the educational system in Texas, including twenty regional educational service centers and 1,235 independent school districts and open-enrollment charter schools.
 - [Texas Juvenile Justice Department \(TJJD\)](#) - This is a newly merged agency that oversees community-based probation services and the state supported facility services for the juvenile justice system in Texas.
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Develop and Strengthen Leadership and Support

Goal

State and local leaders are knowledgeable and supportive of the system of care framework and promote policies and practices that support the expansion of system of care statewide.

Strategy 1: Increase the impact and sustainability of the Children and Youth Behavioral Health Subcommittee (CYBHS) through alignment with the Texas Statewide Behavioral Health Strategic Plan and the provision of guidance to the Behavioral Health Advisory Committee about children's mental health challenges at the state level.

Note: The Children and Youth Behavioral Health Subcommittee was previously the Texas System of Care Consortium.

Action Steps:

1. Align the CYBHS with other child/youth statewide committees and federally-funded initiatives, e.g., Children's Policy Council, SAMHSA Block Grant, Alliance for Adolescent Recovery and Treatment in Texas, and Title V, to integrate system of care values, principles, and practices at the state and local community levels.
2. Provide education and guidance to other stakeholder groups to strengthen strategic alliances with the CYBHS for expansion of system of care practices, including family and youth representation in policy decisions, cultural and linguistic competence, and strategies for directing resources to support system of care practices and initiatives.
3. The CYBHS will provide specific recommendations to the Behavioral Health Advisory Committee to address challenges in the delivery of child and youth behavioral health services and to ensure that information concerning children's mental health evidence-based practices continues to be disseminated throughout Texas.
4. Incorporate system of care values and principles in activities and programs that fill the gaps in children's mental health identified by the Texas Statewide Behavioral Health Strategic Plan.

Time frame: Short term X Long term

Strategy 2: Expand and sustain family-driven infrastructure to increase opportunities for local and statewide family leadership and voice, and strengthen the capacity of family leaders to inform policy and practice.

Action Steps:

1. Create a mechanism to educate state policy leaders on the value of family leadership co-leading with state partners at all levels of policy development for children and youth. Include training and presentations to broad audiences who serve children and youth, but have less experience with mental health services and system of care as these audiences may be integral partners for a comprehensive system of care.
2. Assist Texas Family Voice Network in linking to additional sources of support (including other state coalitions) for sustainability, communication, training, and technical assistance.
3. Develop curriculum for and implement training programs to educate policy-makers at state and local levels on the value of family voice, strategies for authentically engaging families in system change, and facilitation of partnerships with families at each stage of implementation.
4. Provide education and training to family partners about first episode psychosis to then be used to educate and support parents/guardians of youth experiencing first episode psychosis.
5. Provide education on the value of having parent peer support as Medicaid billable.
6. Support the development of local/regional family organizations to promote family voice and cultivate family leadership.

Time frame: Short term X Long term

Strategy 3: Expand and sustain youth-driven infrastructure to increase opportunities for state and local youth leadership and voice, and strengthen the capacity of youth leaders to inform policy and practice.

Action Steps:

1. Increase the identification of methods for linking ACCEPT to other state or national organizations for ongoing technical assistance and opportunities for growth, development, sustainability, branding, communications, and advocacy.
2. Support the development and sustainability of local youth organizations, including the creation of additional Youth MOVE chapters in Texas.

3. Support the continued development of youth-driven social marketing and the use of social media to target audiences on the importance of youth engagement and voice, as well as to encourage youth civic engagement.
4. Adopt and pilot an assessment for organizational readiness for working with youth with the CYBHS membership and other interested state interagency stakeholder groups.
5. Pilot partnership with at least two agencies to include youth representatives in both interagency and intra-agency groups.
6. Strengthen youth voice within the TxSOC through affiliation with ACCEPT and use youth-friendly alternatives to face-to-face attendance at meetings.
7. Structure a training program for developing youth peer support providers that includes certification and youth mental health first aid.
8. Provide education and training on first episode psychosis (FEP) to youth peer support providers to support youth receiving treatment for FEP.

Time frame: Short term _____ Long term X _____

Strategy 4: Enhance mechanisms for state and local systems of care and community coalitions to identify and recommend changes to existing state-level policies and practices to achieve alignment with system of care values and principles, and to improve system of care expansion and sustainability.

Action Steps:

1. Formalize a plan for recommending to the CYBHS changes to policies and practices that are barriers to system of care values and principles.
2. Identify strategies for resolving barriers, such as issue-driven workgroups that collaborate on resolutions to barriers, including drafting proposed changes to policies, rules, and regulations.
3. Establish a timely feedback loop to and from local communities or originating sources and state system of care leaders to evaluate the effectiveness of actions in reducing barriers.

Time frame: Short term X _____ Long term _____

Strategy 5: Develop a coalition of state and local level leaders from various regions, roles, cultures, and systems to champion the importance of addressing children’s mental health in Texas and to provide guidance and training to newly developing system of care communities.

Action Steps:

1. Develop a mechanism to recruit existing and promising culturally-diverse leaders, including youth and family members, or spokespeople for child and youth mental health within the state.
2. Implement recruitment plan, utilizing key local and state partners to identify and recruit individuals interested in supporting children’s mental health.
3. Implement recruitment plan, utilizing key local and state partners to identify and recruit individuals interested in supporting children’s mental health.
 - a. Provide opportunities for identified leaders to participate in targeted system of care social marketing, such as guest blogging on the TxSOC blog, editorials or media interviews, video testimonials, presentations to decision-making bodies, etc.
 - b. Regularly share key facts, data, and talking points related to children’s mental health and system of care to key leaders to strengthen the message for the system of care framework.
4. Support the continued growth of developing leaders through mentoring from established leaders, training opportunities, and opportunities to participate in leadership roles.
5. Review activities and progress of the coalition of leaders.
6. Continue and sustain an appreciation plan recognizing key leaders for their efforts on behalf of children’s mental health.

Time frame: Short term X Long term

Strategy 6: Increase awareness, interest, and support for system of care principles and practices through the use of effective social marketing and communications activities.

Action Steps:

1. Create a mechanism for gathering stakeholder input to continue and enhance an integrated communication strategy that coordinates messaging across state and local agencies.

2. Establish the TxSOC brand in a manner that promotes engagement at state and local levels, and builds understanding about the system of care approach.
3. Provide technical assistance to state agencies, local communities, and other partners about non-stigmatizing, safe, trauma-informed, culturally-sensitive messaging.
4. Develop marketing campaigns targeting system of care values and principles, e.g., youth voice, trauma-informed care, etc.
5. Develop engaging videos featuring children's mental health and system of care champions, podcasts, and drawings/cartoons to use for training and illustrating system of care values and principles.
6. Use data to drive communication on outcomes through creative strategies.

Time frame: Short term _____ Long term X _____

Enhance Access to Effective Services and Supports

Goal

Texas communities have a wide array of high-quality, effective, culturally and linguistically competent services and supports.

Strategy 1: Create infrastructure to support high fidelity wraparound practice throughout the state.

Action Steps:

1. In partnership with the National Wraparound Initiative (NWI), develop certified coaches and trainers within various regions of the state and across various child-serving systems.
2. Establish a mechanism to oversee and support on-going high-quality wraparound training to facilitators and supervisors utilizing the NWI model.
3. Establish a mechanism to oversee and support on-going coaching and skill development for wraparound facilitators.
4. Establish mechanisms for the review of wraparound fidelity, recognizing programs reaching high levels of fidelity.
5. Develop a sustainability plan to support high fidelity wraparound, considering strategies such as credentialing of providers or agencies and on-going workforce development needs (e.g., the frequency of ongoing training and coaching).

Time frame: Short term _____ Long term X

Strategy 2: Further enhance the infrastructure to support effective peer support services for youth and family members through training, policy, financing, social marketing, and accountability efforts.

Action Steps:

1. Continue to expand the number of trained and certified family partners providing peer support within child-serving systems.
2. Enhance the financial sustainability of youth and parent peer support activities, including exploring changes to the Medicaid state plan.
3. Utilize social marketing to share information about the benefit of family peer support services in each of the child-serving systems, including individual “testimonials.”

4. Conduct research or evaluation studies exploring the impact (including cost-effectiveness) of family peer support services.
5. Identify potential local communities or organizations to pilot the development of a youth peer support program.
6. Evaluate the pilot program and provide recommendations for further development of youth peer support within the state.
7. Promote the use of peer support to youth receiving services for first-episode psychosis and family partner support to their parents/guardians.

Time frame: Short term _____ Long term X _____

Strategy 3: Infuse system of care principles and practices within professional training programs through partnerships with higher education entities and professional organizations.

Action Steps:

1. Establish a subcommittee of the CYBHS interested in pre-graduate training collaboration, including representatives from higher education institutions.
2. Develop informational materials, including key points and strategies for implementation covering systems of care principles and practices for dissemination to institutes of higher education for pre-graduate training.
3. Establish a regional speakers' bureau of individuals experienced in the system of care framework who are willing to be guest presenters at the request of faculty.

Time frame: Short term _____ Long term X _____

Strategy 4: Expand access to non-traditional services and supports for children and youth with complex mental health challenges and their families, such as behavioral health consultants to daycare settings, language services, respite care and transportation.

Action Steps:

1. Identify barriers to and gaps in services and supports (e.g., funding, training, workforce, etc.).

2. Examine opportunities for cross-system support at state and community levels to enhance access and develop capacity.
3. Provide technical assistance to address barriers through partnerships among child-serving agencies and other stakeholders.

Time frame: Short term _____ Long term X

Strategy 5: Encourage and promote the selection, implementation, and monitoring of evidence-based and promising mental health practices, including integrated health and school-based services and supports.

Action Steps:

1. Provide technical assistance through webinars, written and web-based materials, and direct communication to state or community organizations on strategies for identifying and choosing evidence-based or promising practices.
2. Provide technical assistance to organizations or communities to support local adaptation or implementation considerations, such as cultural appropriateness or use within specialized settings.
3. Coordinate or provide training through appropriate mediums (e.g., workshops, online training, live webcast) on select evidence-based or promising practices.
4. Promote state and/or local capacity for monitoring and tracking fidelity to select evidence-based or promising practices and linking with child and family outcomes.
5. Provide regular communication between local communities and state entities to highlight successful programs, as well as successful strategies for implementation and organizational change.
6. Develop and disseminate online and offline materials to families, youth, and advocates highlighting effective programs and services.
7. Provide training and technical assistance around conducting evaluations, including cost-benefit analyses, of evidenced-based or promising practices implementation efforts.
8. Continue to identify and apply for grant opportunities supporting evidence-based or promising practices implementation and evaluation across child-serving systems.

Time frame: Short term _____ Long term X

Strategy 6: Support efforts to increase the cultural and linguistic competency and diversity within organizations and collaboratives that serve children and youth with serious mental health challenges and their families.

Action Steps:

1. Work in partnership with state and community leaders (e.g., the Center for the Elimination of Disproportionality and Disparity, the Hogg Foundation for Mental Health, and local System of Care communities) to gather existing data on mental health disproportionality, disparities, and workforce cultural and linguistic competence.
2. Through the review of data, determine areas of success, areas needing improvement, and areas needing further research.
3. Develop recommendations and strategies to improve cultural and linguistic competence in areas of service to children and youth that have mental health challenges and their families.
4. Provide training and technical assistance through webinars, written and web-based materials, and direct communication to state or community organizations for increasing cultural and linguistic competence.
5. Provide training and technical assistance to help local communities implement CLAS Standards in the areas of: 1) governance, leadership, and workforce; 2) communication and language assistance; and 3) engagement, continuous improvement, and accountability.
6. Develop a cultural responsiveness training curriculum to enhance provider interactions with youth.
7. Support and enhance efforts of community-level, CLC specialists.

Time frame: Short term _____ Long term X _____

Strategy 7: Provide training and technical assistance to support the implementation of best and promising practices within communities addressing youth experiencing first-episode psychosis (FEP).

Action Steps:

1. Provide training and technical assistance on the Coordinated Specialty Care to providers working with youth with FEP.
2. Provide outreach and education to child-serving agencies in local communities to assist with identification and referral of youth who may be experiencing FEP.

3. Promote the coordination of services at the state and community levels across the child and adult service systems to support young people experiencing early psychosis.

Time frame: Short term _____ Long term X _____

Strategy 8: Advance program development, financing and workforce training to expand the array of effective services and supports for youth transitioning to adulthood.

Action Steps:

1. Assess and modify policies to allow young people with mental health challenges access to developmentally appropriate services.
2. Continue to expand or enhance existing promising programs for transition-age youth, such as the Preparation for Adult Living program, Transition Living Centers within the foster care system, the Via Hope “Transition-Age Youth Initiative,” and the Title V Adolescent Health Program.
3. Evaluate existing transition-age youth service programs, and provide recommendations for expansion of these programs within the state.
4. Promote the use of best practice suicide and other violent deaths prevention, screening and intervention for youth with elevated risk.
5. Provide financial support for family partner services for youth 18 to 20 years old who want family members involved in their treatment.

Time frame: Short term _____ Long term X _____

Strategy 9: Support the advancement of the recovery-oriented systems of care to ensure adolescents with co-occurring mental health and substance abuse disorders are able to access effective treatment and recovery supports.

Action Steps:

1. Collaborate with the Alliance for Adolescent Recovery and Treatment in Texas (AART-TX) to identify opportunities to strengthen local systems of care to address the needs of youth with co-occurring disorders.
2. Support training and technical assistance to mental health providers to effectively screen, conduct brief engagement interventions, and refer youth in need of substance abuse services to appropriate community providers.

3. Leverage training efforts across the TxSOC and AART-TX initiatives to increase the number of providers exposed to training advancing system of care values, such as the authentic engagement of youth and families in decision-making roles and cultural and linguistically appropriate care.

Time frame:

Short term _____

Long term X

Support Community Development of System of Care

Goal

Texas communities increase readiness, enhance the level of implementation, and sustain the system of care framework, thereby increasing the number of children, youth and their families served through system of care practices.

Strategy 1: Increase interest and readiness to adopt the system of care framework in communities across the state through social marketing, training, and technical assistance.

Action Steps:

1. Cultivate local communities' system of care interest and readiness through education on system of care values and principles, providing ongoing webinars that highlight the value of system of care implementation, and identifying best practices both within and outside of Texas on children's mental health.
2. Keep communities up-to-date with the latest news and information about system of care through regular resource emails, including training opportunities, events, webinars, reports and funding opportunities.
3. Utilize social media and the Texas System of Care website to create an online dialogue that encourages an exchange of knowledge, an atmosphere of mutual support and peer-to-peer learning networks among communities and state stakeholders.
4. Enhance the "resources" section of the Texas System of Care website, including a lessons learned section, to serve as a valuable asset for system of care communities.

Time frame: Short term _____ Long term X

Strategy 2: Facilitate the development of a strong community infrastructure (e.g., governance, youth and family voice, sustainability) to implement system of care through targeted strategic planning and technical assistance in selected communities.

Action Steps:

1. Identify communities interested in implementing the system of care framework through a comprehensive assessment of communities with first episode psychosis programs.

2. Assess community readiness for system of care implementation in identified communities.
3. Contract with or establish a memorandum of understanding with selected communities to outline primary goals and technical assistance needs.
4. Conduct community asset-mapping, contingent on readiness, to identify potential strategic partnerships and assist communities in creating alliances, including families and youth, judges, law enforcement, health care providers, and others.
5. Provide technical assistance to identified communities to create or enhance a governance or coordinating body structure, including the identification of necessary members and the development of bylaws and operating procedures.
6. Provide technical assistance to support the development of community strategic plans for the local implementation of system of care principles and practices.
7. Provide opportunities for technical assistance and training in effective national and state system of care promising practices.
8. Support peer-to-peer learning networks among new and experienced system of care communities to share ideas, strategies, lessons learned, and increase accountability.
9. Provide technical assistance to communities to identify and implement financing strategies to support and sustain system of care efforts through:
 - a. financial asset mapping,
 - b. integration of local resources to increase the availability of flexible funds,
 - c. volunteer organizations, time banks, and other non-traditional financing strategies, and
 - d. grant writing and fund raising.
10. Provide ongoing coaching and consultation, tailored to the characteristics of the community (e.g., rural or frontier communities, border communities, communities with large refugee populations, communities with many military families, etc.), to ensure community goals are met.

Time frame: Short term _____ Long term X

Strategy 3: Support community advancement in system of care readiness and development by targeting specific issue areas and special populations.

Action Steps:

1. Through a special issue subcommittee of the CYBHS, identify targeted areas of focus or populations (e.g., effective governance, family/youth voice, cultural and linguistic competence) with the greatest potential impact on system of care expansion and the greatest community interest for targeting support. Approximately one to two special areas of focus will be selected each year.
2. Provide cultural humility and responsiveness training for local communities, including training to promote equity of use, access, and outcomes for all populations and to support individuals most vulnerable to experiencing behavioral health disproportionality and disparities.
3. Create a change plan for each identified area of focus, utilizing one or more of the following strategies:
 - a. Sponsor a policy academy, targeting state and/ or local teams that have an emphasis on identified targeted issues or populations, aimed at sharing information on best practices and facilitated planning for making targeted changes.
 - b. Develop local learning collaboratives around a targeted special issue. Learning collaboratives will receive training, technical assistance, and support for change management, and opportunities for sharing best practices and peer-to-peer learning across communities.
 - c. Collect information on identified needs for changes to policy through the appropriate mechanism (e.g., legislation, contract changes, etc.).
4. Create and implement an evaluation to document the effectiveness of targeted activities and provide feedback to change leaders throughout the process.

Time frame:

Short term_____

Long term___X___

Maximize Efficient, Sustainable Financing Strategies

Goal

Texas has maximized public and private funding at the federal, state, and local levels to expand and sustain an effective statewide system of care.

Strategy 1: Develop and implement a financing plan to provide long-term support for the infrastructure for the expansion and sustainability of a statewide system of care approach.

Action Steps:

1. Document financial support needed to support key infrastructure elements to continue system of care expansion within the state.
2. Assess and map current sources of financial support and their sustainability at both state and local levels.
3. Identify opportunities for long-term sustainable support of infrastructure, including general revenue, block grants, project-specific grants, foundations, local funds, and fund raising.
4. Identify opportunities for long-term sustainable support of infrastructure, including general revenue, block grants, project-specific grants, foundations, local funds, and fund raising.
5. Establish commitments from key funding partners, including community partners and faith-based organizations, when possible.
6. Pursue and implement potential financing opportunities to sustain the System of Care statewide.
7. Utilize outcome data and evidence of cost savings or avoidance to promote investment in the expansion of the system of care framework.

Time frame: Short term _____ Long term X _____

Strategy 2: Explore opportunities for enhancing system of care implementation by maximizing existing revenue sources, including the Medicaid state plan, Early Periodic Screening, Diagnosis, and Treatment (EPSDT), Texas Medicaid 1115 waiver, Title IV-E, and state block grants.

Action Steps:

1. Explore collaborative financial opportunities to improve child and youth mental health outcomes with entities involved in foster care reform.
2. Identify shared goals and coordinated strategies that could be funded with state block grants.
3. Support changes to Medicaid that increase the availability of intensive home-based services, behavior specialists, youth peer support services, parent peer support services, early childhood mental health screening, early intervention and wraparound planning.
4. Explore opportunities for unmatched funds that could be utilized to increase (i.e. match) available Medicaid federal funding.
5. Maintain current and explore additional financial partnerships with the maternal and child health programs through Title V and programs and services funded through Title IV-E.
6. Examine other options that maximize the use and effectiveness of federal funds.

Time frame:

Short term_____

Long term___X___

Strategy 3: Support the implementation and expansion of the 1915(c) Medicaid YES waiver, including enhancing the compatibility with other funding resources.

Action Steps:

1. Continue evaluation of the YES waiver program to identify strengths and barriers, service utilization trends and outcomes of the program.
2. Consider changes to the definition of waiver services or the addition of new services that are critical for maintaining youth within the community, thereby offering additional opportunities for sustainable financing.
3. Provide training and coaching to facilitators/case managers to ensure high-fidelity wraparound planning for waiver participants.

4. Provide training and coaching for family peer services, which are unique to the YES Waiver, to ensure high quality service provision for Waiver participants.
5. Coordinate with youth and family members, HHSC Behavioral Health Services, HHSC Medicaid Office, DFPS, TJJD, and participating communities to identify opportunities to integrate the YES waiver program with existing state and local programs and maximize available funding.
6. Support communities statewide with YES waiver implementation to ensure high quality services utilizing system of care principles and practices.

Time frame: Short term _____ Long term X _____

Strategy 4: Explore opportunities for developing new revenue resources to support system of care implementation, such as health care reform, Medicaid 1915(i), private health insurance, corporate partnerships, foundations, and private philanthropy.

Action Steps:

1. Establish a committee that works in partnership with the CYBHS to create a resource development plan, focused on identifying opportunities to advance elements of the Texas Statewide Behavioral Health Strategic Plan with potential partners.
2. Prepare proposals, concept papers and presentations to prospective funding sources and establish mutually beneficial partnerships that advance the goals of the system of care initiative.
3. Identify opportunities to inform state implementation of health care reform in support of system of care principles and practices.
4. Explore partnerships and opportunities to develop Home & Community-Based Services for youth at risk for institutional care and for transition-age youth through a Medicaid 1915(i) option.

Time frame: Short term _____ Long term X _____

Strategy 5: Establish voluntary community demonstration sites that will coordinate or integrate state and local funding for children with serious mental health challenges and their families.

Action Steps:

1. Identify one or more communities with appropriate readiness and interest to conduct a demonstration of an integrated financing approach for children and youth with serious emotional challenges (e.g., accountable care entity, health home model).
2. In partnership with the community, identify the preferred financial model and contributing partners.
3. Establish a state-level team with programmatic and financing expertise to provide technical assistance to the community and address state barriers to the care model.
4. Conduct the demonstration project with alignment to system of care values and principles.
5. Evaluate the demonstration project, including documenting procedures, lessons, outcomes, and cost impact.
6. Replicate the project in in additional communities, including sustainable financing.

Time frame:

Short term_____

Long term___X___

Create Accountable Systems

Goal

Stakeholders have accessible, reliable, and valid data to make informed decisions, at individual, community and statewide levels, to improve child and family outcomes.

Strategy 1: Enhance the use of a data dashboard with key indicators of children's mental health systems to monitor strengths, needs, outcomes and trends that is used by state and local decision-makers.

Action Steps:

1. Determine and define key indicators across systems and those specific to each system.
2. Build on the existing data dashboard to identify opportunities for more timely information from child-serving agencies.
3. Build on the existing data dashboard to incorporate data available at the community level to provide communities with additional tools for data-driven decisions.
4. Incorporate links to the data dashboard on key partner websites.
5. Promote the use of the dashboard through presentations and other communication tools.
6. Monitor the use of the dashboard by stakeholders through website analytics, use in policy papers, and user feedback.
7. Utilize the data subcommittee to continue to identify potential modifications to the data dashboard to enhance its usefulness.

Time frame: Short term X Long term

Strategy 2: Increase the use of families and youth in developing evaluation plans at the local and state level, gathering and analyzing data and reporting and disseminating results of accountability activities.

Action Steps:

1. Ensure and support the participation of family members and youth on the data subcommittee as participants in all aspects of the evaluation of the system of care expansion effort.
2. Recruit and train family members and youth as evaluators to recruit families for participation, conduct focus groups, conduct interviews, and participate in interpretation and dissemination of findings.
3. When appropriate for reporting, ensure that outcomes and trends are written in strength-based, family-friendly language with the use of success stories.
4. Facilitate the inclusion of youth and family evaluators in presentations or publications of evaluation findings.
5. Highlight the importance of youth and family participation in evaluation through communication and social marketing strategies.
6. Provide technical assistance and training to agencies or communities interested in increasing the participation of families and youth in evaluation activities.

Time frame: Short term _____ Long term X

Strategy 3: Create state and local capacity to track and monitor fidelity and outcomes across child-serving systems to better understand the multi-system impact.

Action Steps:

1. Review previous and current efforts to share administrative data across state child-serving systems and identify barriers to success.
2. Explore successful models of cross-system data sharing within other states or geographic areas and identify benefits and risks/resources for each model.
3. After consideration of existing resources and agency support, develop a feasible plan to collect and support data sharing for the purpose of cross-system outcomes monitoring.
4. Implement the plan to develop capacity for cross-system data sharing.

5. Provide technical assistance to state or local agencies to support an understanding of the available data and processes for accessing and utilizing the data.
6. If successful with limited data-sharing experiences, examine potential to further enhance capacity through technology support or inclusion of additional data sources.

Time frame: Short term _____ Long term X _____

Strategy 4: Enhance the capacity of local organizations or community coalitions to plan evaluations and utilize data in ongoing quality management activities.

Action Steps:

1. Survey university faculty for expertise in program evaluation and interest in developing partnerships with local organizations and child-serving agencies.
2. Establish a panel of experts in mental health evaluation with representation from a variety of academic institutions and relevant disciplines from across the state (i.e., the Mental Health Evaluation Panel).
3. Develop a mechanism through existing websites for local organizations and community coalitions to request limited technical assistance from academic experts on conducting an evaluation.
4. Link interested organizations with a member of the Mental Health Evaluation Panel, based on geographic region and shared interest areas, for time-limited technical assistance.
5. Support continued relationship development, such as through opportunities to explore funding for evaluation activities or other research partnerships.
6. Provide brief trainings on evaluation models through webinars or web-based videos.

Time frame: Short term _____ Long term X _____

Strategy 5: Increase the use of effective screening tools, as well as strength-based, valid measurement tools for child outcomes and perceptions of care.

Action Steps:

1. Identify opportunities to strengthen the reliability of information reflected in the Child and Adolescent Needs (CANS) assessment within the public mental health system.
2. Promote and support the inclusion of evidence-based screening tools to identify early psychosis, suicide risk, trauma exposure, and substance abuse within child-serving systems.
3. As other child-serving systems revise assessment instruments, support inclusion of culturally appropriate, strength-based measures.
4. Explore opportunities to share training resources for screening or assessment tools across child-serving systems.

Time frame: Short term X Long term

Strategy 6: Increase the use of technology to support effective data management, information sharing and coordination of services.

Action Steps:

1. Identify opportunities to reduce policy barriers to information sharing across existing data management and health records systems.
2. Identify opportunities to enhance the use of technology or implement best practices to increase information sharing across existing data management and health records systems.
3. Support local communities in using technology to enhance service coordination and data management.
4. Identify opportunities to incorporate the effective use of technology in service delivery.

Time frame: Short term Long term X

Building Support for the Plan

The process leading to the creation of this strategic plan sought from the beginning to involve and engage a broad cross-section of policy makers, leaders of state and local child and youth-serving systems, families, youth, providers of behavioral health services and other stakeholders.

At each stage of goal-setting and strategy development, the planning team sought input through structured focus groups, individual interviews and online surveys. The results of these efforts have been incorporated into the strategic plan.

Moving forward, the Texas System of Care team will utilize a variety of strategies to promote the strategic plan to key stakeholder groups to increase awareness, interest, and buy-in for system of care principles and practices, including:

- Make the plan available on the Texas System of Care website for online viewing and download.
- Create an executive summary of the plan for a quick overview and also make it available online.
- Develop promotional tools that can be mixed and matched to key stakeholder groups. Stakeholder groups to address could include:
 - policymakers and legislators,
 - advocacy organizations,
 - leaders,
 - mental health professionals,
 - community and business leaders, and
 - youth with mental health challenges and their families.

Tools will include, but not be limited to:

- presentations and face-to-face meetings,
- email communications,
- website,
- social media,
- videotaped introductions from key system leaders showing relevance of the plan, and
- webinars.

The strategic plan will evolve based upon the successes and challenges of implementation. Many have contributed time and talent to the effort. Many more will have the opportunity to participate in the implementation of plan, as Texas moves toward the vision that “all Texas children and youth have access to high quality mental health care that is family-driven, youth-guided, community-based, culturally-grounded and sustainable.”

- END -

CHILD AND YOUTH BEHAVIORAL HEALTH SUBCOMMITTEE (CYBHS)
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Family Representatives	Candace Aylor Barbara Granger
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