Children and Youth Behavioral Health Subcommittee
Wednesday, April 10, 2019

Agenda Item 1: Welcome and Introductions

The Children and Youth Behavioral Health Subcommittee meeting was called to order at 10:10 a.m. with Barbara Granger welcoming the members. Members introduced themselves. Table 1 shows attendance for the meeting.

Table 1: CYBHS Member Attendance

MEMBER NAME	YES	NO	MEMBER NAME	YES	NO
Behavioral Health Advisory Council			**Suicide Prevention**		
Donna Fagan		X	Merily Keller		X
Community			Lisa Sullivan (Alternate)		X
Heart of Texas Ron Kimbell	X		**TX Correctional Office Medical/Medical Impairments**		
Heart of Texas Telawna Kirbie (Alternate)		X	Krista Greathouse	X	
Tropical Texas Monica Rodriguez		X			
Family					
Barbara Granger	X		**Texas Dept. of Family & Protective Services**		
Valencia Gensollen		X	Lauren Bledsoe	X	
Verlyn Johnson (Alternate)	X		Trace Burks-Bell (Alternate)		X
Health and Human Services Commission			**Texas Dept. of State Health Services**		
Children's Mental Health Amelia Somers	X		Vacant		X
Medicaid John Huffine		X	**Texas Education Agency**		
Mental Health Coordination Lilly Nguyen		X	Julie Wayman		X
Texas System of Care Kisha Ledlow	X		Denise Magallanez (Alternate)		X
Substance Use Treatment Suzanne Alley	X		**Texas Juvenile Justice Department**		
Children's Traumatic Stress Network			Lori Robinson		X
Vacant			Marie Welsch (Alternate)	X	
Higher Education			**Youth/Young Adult**		
UT-TIEMH Molly Lopez	X		Mitch Cochran		X
			Nigel Cunningham Williams		X

Attended Online: Sammie Artho, Jennifer Baran-Prall, Julie Bourne, Melanie Gann, Amanda Hodges, Shanna Robins-Donnell, Ivonne Tapia, Nicole Weaver, Soila Villarreal

Also in attendance: Arnold Amador, Anne Bondesen, Cristopher Burton, Jameson Cardenas, Jessi Davis, Glenn Dembowski, Kaleigh Emerson, Laura Gold, Elyse Greenamyre, Andrés Guariguata, Kamala Joy, Sachin Kimble, Tracy Levins, Zatara Lumen, David McClung, Shannon Moreno, Cory Morris, Melissa Pattison, Amelia Somers, Warren Stewart, Sara Underwood, Kate Volti

Agenda Item 2: Family/Youth Experience
Elyse Greenamyre shared her experience as a young person in recovery. She is currently working on her master's degree in social work at Texas State University. Ms. Greenamyre was recently notified that she was nominated by her professors and will soon be receiving "Masters' of Social Work Service" award.

Through her lived experience with substance use disorder and recovery. Ms. Greenamyre also works with Cenikor as a youth peer recovery leader. At Cenikor, she facilitates support groups at Gary Job Corps, San Marcos Academy, and at Texas State University. Once each month, she also facilitates family support groups. The flexibility of her funding allows different approaches with different support groups. Her work is very youth-driven and largely depends on the specific goals of each of the groups.

She has recently begun working on developing a peer mentorship program working with freshman in recovery who will work with college juniors and seniors in group with more time in recovery. This peer mentorship will increase the freshman's engagement in the recovery community and will provide good leadership development and mentoring-type experience to the older students.

Ms. Greenamyre briefly described her current internship with TIEMH and ACCEPT and expressed how rewarding it is to be able to take her lived experience related to substance use and mental health challenges and use it to help others. She has been an ACCEPT member since November 2017 and recently was elected president. On May 25, 2019, Ms. Greenamyre will celebrate four years in recovery.

Agenda Item 3: Children and Youth Behavioral Health Subcommittee (CYBHS) Business

Review and Approval of Minutes
The minutes from the October 10, 2018 meeting and January 9th were presented for review. As there was not a quorum at the January meeting to approve the October minutes, Molly Lopez asked members to first review and be prepared to

discuss the October 10, 2018 minutes. Verlyn Johnson moved to approve the October 10 minutes. No changes were offered and the October 10, 2018 minutes were approved unanimously as submitted. The January 9, 2019 meeting minutes were then presented to CYBHS members. Lauren Bledsoe (DFPS) moved approval of the January 9, 2019 minutes as submitted; Marie Welsch (TJJD) seconded the motion. There was no discussion and the minutes were approved unanimously by the members.

Policy Recommendations for the Behavioral Health Advisory Committee (BHAC)
Molly Lopez provided a brief overview of the process through which recommendations are provided to BHAC by CYBHS. She noted that the Texas Learning Early Childhood Committee (TLEC) is proposing two policy recommendations to CYBHS for approval and submission to BHAC. The policy recommendations relate to strengthening the processes for early childhood developmental screening.

The first recommendation is to create or improve an existing web platform for developmental challenges where families, medical providers, etc. can access evidence-based practices and screenings. Data on screening activities and referrals would be made available to DSHS and identified partners for data sharing and early childhood developmental screening state reporting.

The second recommendation would ask Child Care Licensing and the Texas Rising Start Quality Rating and Improvement System to require child care and education centers to administer developmental screenings for all children in their care who meet the age requirement.

Suzanne Alley asked if the tools recommended in the policy recommendations would require additional training by the providers. Dr. Lopez responded that the instruments would probably require some training, but there are mechanisms in place to help make that training easy to provide and to access.

Verlyn Johnson asked if there would be the opportunity to track access to referrals and services. Dr. Lopez indicated that there would be the ability to track access to referrals, but not to specific children.

Barbara Granger called for additional questions and comments from members. As these are recommendations from a workgroup, Policy Recommendation #1 has been moved by the workgroup for approval by the CYBHS. Suzanne Alley seconded the motion.

Lauren Bledsoe noted that if the recommendations related to funding, she would like the opportunity to present those recommendations to her agency leadership. Ms. Granger informed the group that there was a motion on the floor and members could choose to abstain or vote nay if there was uncertainty.

Policy Recommendation #1: *Create (or improve an existing) early childhood developmental screening web platform and data portal, utilizing the ASQ-3 and ASQ: SE-2 developmental screenings tools and early childhood development information and referral resources. The platform and screening data portal to be made available to families, medical providers, and child care staff statewide. The data on screening activities and referrals would be made available to DSHS and identified partners for data sharing and early childhood developmental screening state reporting.*

The vote was called and Policy Recommendation #1 passed as written, with Ms. Bledsoe and Marie Welsch abstaining.

Policy Recommendation #2: *Implement a state policy that Child Care Licensing and the Texas Rising Star Quality Rating and Improvement System require child care and education centers to administer developmental screenings for all children who meet the age requirement.*

Policy Recommendation #2 was opened for discussion after being moved for approval by the workgroup and seconded by Ron Kimbell. There was no discussion and Policy Recommendation #2 passed as written, with Ms. Bledsoe abstaining.

Both recommendations will now be presented to the BHAC Policy Subcommittee for further consideration and possible action.

Agenda Item 4: National Best Practices and State Initiatives for Youth Suicide Prevention (Laura Gold)
Laura Gold is the suicide safe care coordinator for the Health and Human Services Commission. Handouts were available to all participants.

Suicide safer care requires a paradigm shift towards a public health approach for suicide prevention and care, focused on suicide prevention, intervention, and postvention. Most people have experienced the effects of suicide in our personal or professional lives. Suicide safer care requires strong leadership, established continuity of care, immediate access to care for persons in suicidal crisis, productive interactions between persons at risk and persons providing care, and a focus on evaluation and using data for quality improvement.

The 24-72 hours after a person is discharged from the hospital is the most dangerous time. Ms. Gold pointed out that we need to make sure and provide individuals with more than a prescription and a referral for an appointment. It needs to be a warm transfer, linking them with real people and real resources. Trainings for adults who work with you include *ASK to Save a Life, ASIST – Applied Suicide Intervention Skills Training,* and *Youth MHFA – Mental Health First Aid*.

Ms. Gold shared that each local mental health authority and local behavioral health authority has an identified and designated suicide prevention coordinator. These coordinators will develop collaborative relationships with local suicide prevention

coalitions and participate in local community suicide prevention efforts; attend statewide conference calls and participate in the development and implementation of local community suicide postvention protocols as described in CDC postvention guidelines, including contacting the state coordinator of any youth suicide deaths contribution go possible suicide cluster or contagion.

Agenda Item 5: Coordinated Specialty Care (CSC) Implementation (Warren Stewart and Melissa Pattison)
Handouts were provided. Melissa Pattison began the presentation by discussing the team-based, person-centered and recovery oriented approach, and shared decision-making that are the hallmarks of the coordinated specialty care. There are 10 current CSC sites in Texas. Harris and Metrocare have been in existence since 2015; eight other LMHAs have become CSC providers since 2016. In FY 19, CSC services will be expanded to an additional 13 sites. The agency's exceptional items request, if funded, included expansion funds to enable the remaining 13 local mental health authorities to begin providing CSC services in FY 2020-2021.

Each team will serve about 30 clients each year. Individuals must meet specific eligibility criteria and be between the ages of 15 and 30 years of age, must have had a diagnosis that includes psychosis within the last two years, and must be deviated into an early onset level of care (LOC-EO) based on their age. There are two levels of care created for this program: (1) Level of Care – Adult Early Onset (LOC AEO) and Level of Care – Childhood Early Onset (LOC-CEO).

David McClung (TIEMH) asked what the peer support looks like if youth are placed in LOC-CEO. Mr. Stewart replied that youth under the age of 18 will not have access to a peer at this point, however we will be looking at the youth peer support work going on in Burke and Lifepath as pilots for peer support for that age group.

Sachin Kimble (HHSC) asked about the transition process for individuals who enroll in services at 29 years. Mr. Stewart explained that the average length of stay in the program is a couple of years and they strive to make the transition to other services or to no services as smooth as possible. If individuals have a unique and specific need to stay past the age of 30, they will make every effort to ensure that happens.

Dr. Lopez (TIEMH) noted that there could be some opportunities for collaboration around substance use, family-driven services, and youth-driven services.

In response to a question from Jessi David related to the prevalence of the peer supports throughout all of the teams, Ms. Pattison responded that all of the CSC teams are required to have peer supports. She added that not all of the teams have them at all points in time, indicating that staff turnover is often a serious issue.

Ron Kimball asked about the selection of the sites to be funded by the exceptional items request. Mr. Stewart responded that site selection, in large part, will be

determined based on the guidance from the legislature and the amount of funding provided.

Agenda Item 6: National Alliance on Mental Illness Texas (NAMI Texas) Policy Updates (Alissa Sughrue)

Alissa Sughrue presented on bills that might impact children's mental health. Ms. Sughrue referred to a handout in the packet of bills that are current or pertinent to children's MH (please see handouts for reference). There are 47 days left, with a total of 9407 bills and resolutions that have been introduced, and 1531 resolutions that have been passed thus far. Yesterday the Senate passed their version of the budget; last month the House passed their version of the budget.

A conference committee will begin soon to resolve the differences. They're hearing that if a bill hasn't received a hearing this week, it's not going.

Some of the focuses are capacity & workforce, student mental health, school climate, foster care, maternal health, children's insurance, and suicide prevention. A lot of bills to expand Medicaid eligibility; sexual violence/human trafficking, and trauma.

The short version that Ms. Sughrue wanted to get across is that if the bill hasn't been heard in committee so far, it doesn't stand a good chance of moving forward. If something you want funded is in either the House or the Senate budget, you might be able to get it moved. If it's not in either budget, it won't be funded at this point. There's a strong interest in student mental health, trauma, and education funding in this session. It's important to advance bills that help student mental health and well-being, but also to recommend changes or oppose bills that stigmatize mental health disorders.

Agenda Item 7: Texas System of Care Strategic Finance Plan Development (Kisha Ledlow)

Kisha Ledlow introduced this agenda item by reminding members that the CYBHS is the governance structure for the System of Care. One of the things the Texas System of Care is tasked with is to develop a finance plan and submit to SAMHSA by September 30.

To do so, TxSOC staff would like to invite members to join a workgroup to complete the finance plan. Additionally, TxSOC staff will be leading breakout groups to engage in some discussion and brainstorming. The plan will work towards meeting the 8 goals that were outlined in the proposal we submitted to SAMHSA. Goals included:

1. Increasing leadership support for the Texas System of Care at the state level.
2. Develop a system that would allow children and youth referred by any child-serving agency to be served by high fidelity wraparound when clinical eligibility is met.

3. Improve Texas' capacity to support the unique needs of TAY.
4. Improve the continuity of care for children and youth in juvenile justice placements and residential treatment centers
5. Continue development of youth and family voice and leadership in the Texas behavioral health systems.
6. Reduce disparities in access and outcomes of services
7. Improve knowledge statewide about the Texas system of care and systems of care in general regarding sustainability
8. Evaluate the system of care and engage in continuous quality improvement.

Ms. Ledlow divided the members into two discussion groups and asked each group to discuss the following questions:
a. Who controls/oversees the dollars that support youth with mental health challenges and their families? Where's the money?
b. How are we redirecting dollars from deep-end spending (OOHPS) to home and community based services?
c. How are we addressing the non-fiscal needs, including policies that affect financing, policy changes that are needed, training and technical assistance that we could provide, improving or increasing the roles of youth and families in this work?

Members broke into two groups to brainstorm responses to these questions. Responses are included in the appendix at the end of this document.

Agenda Item 8: Project Updates
Alliance for Adolescent Recovery and Treatment in Texas: Cris Burton
Cris Burton updated group members on activities of the Alliance since the last CYBHS meeting. He reported that the AART Stakeholder Implementation Group has formed a Workforce Development workgroup, chaired by Jessi Davis, to look at ways to improve training, certification, education, etc. for individuals in the behavioral health workforce. Mr. Burton communicated that Cenikor hosted a focus group for AART staff. Focus group participants underscored the importance of early identification and referral to services and the overwhelming need for mental health services. Additionally, Mr. Burton noted that AART staff will partner with TJJD to host a webinar on May 14 which will provide participants with an overview of the Seven Challenges program, featuring a juvenile justice provider from Georgia who has been using Seven Challenges in their juvenile justice program.

Mr. Burton reported that Seven Challenges leader training was completed in January for providers from Cenikor, AAMA, Unlimited Vision, and Central Plains. Mr. Burton concluded his presentation by announcing that HHSC released a new request for applications for AART with a due date of April 8. We hope to have something finalized by June or July.

ACCEPT: David McClung
ACCEPT held their annual meeting in Wimberly, Texas with 22 young people and a few supportive adults. They hope to review and present the evaluation results at a future ACCEPT leadership meeting. Several ACCEPT workgroups continue to meet, including the Social Communication and Media workgroup and the CLC workgroup. The Austin chapter continues to meet on a bi-weekly basis. Morgan Pettis, treasurer of ACCEPT, was recognized as the National Recovery Student of the Year. ACCEPT looks forward to establishing its third chapter when Cenikor of San Marcos becomes a chapter in the next few months.

ACCEPT's youth peer support workgroup has also been meeting and reviewing curricula related to youth peer support. They will be inviting supportive adults into that conversation a little later. Members who are interested in participating as a supportive adult with ACCEPT's work should contact David McClung.

Texas Mental Health Creative Arts Contest: Jameson Cardenas
Jameson Cardenas reported that the Texas Mental Health Creative Arts contest featured four age groups (elementary, middle school, high school, and adult) and three categories (original artwork, writing, and photography) for submissions. Through a new partnership with the Quell Foundation, a $1,000 writing scholarship will be offered to an eligible recipient.

There were 770 submissions this year, double the numbers of any previous year. Members are invited to see previous winners at www.gallery.txsystemofcare.org. The 2019 winners will be announced later this month.

Winning artwork will be featured as part of the West Studio Tour, at the Texas State Capitol, and at a reception at HHSC on May 20 from 4:00 pm until 6:00 pm. Members are invited to attend all of the events.

Children's Mental Health Awareness Day Toolkit: Jameson Cardenas
Texas System of Care staff developed a children's mental health awareness day toolkit, aligned with SAMHSA's theme and designed specifically to meet the needs of local communities to assist in event planning. The toolkit contains event planning checklists, media templates, draft proclamations, themed artwork, and themed social media information (with images and statistics) ready for customizing and dissemination. Members can view the toolkit at www.cmhtexas.org.

Children's Mental Health Awareness Day: Jameson Cardenas
Mr. Cardenas provided a brief overview of Children's Mental Health Awareness Day plans. The event will begin at 10:00 am on April 27, 2019 at the Browning Hangar at Mueller in Austin. The keynote will be noted children's musician, Joe McDermott. A community resource fair and family festival will follow. For more information, see www.cmhaustin.org.

Texas Family Voice Network (TxFVN): Verlyn Johnson
Verlyn Johnson reported that the TxFVN now has a full shared leadership team, including a state system lead, policy lead, communications liaison, and a secretary. Last month, TxFVN hosted a policy briefing and educational opportunity on how to present at the legislature. After learning about the legislative process, participants went to the Capitol and spoke to legislators about the importance and benefit of family partners. TxFVN also is proud to announce that it has two new members from the New Braunfels area, who are sharing their experience with their children's recovery from substance use. Ms. Johnson concluded by noting that TxFVN is looking at ways to partner with other agencies, with the goal of bringing in family partners and family mentors into those agencies, helping those families go through the process and increasing the number of certified family partners in Texas.

Collaboration with CRCGs: Kisha Ledlow
Ms. Ledlow communicated to members that a workgroup is planning the 2019 Texas System of Care and Community Resource Coordination Group Conference. It will be held at the Austin Airport Hilton on July 17-19. The workgroup is developing a Save the Date for distribution. Ms. Ledlow also noted that a Call for Presenters has been distributed, with a deadline of April 17 for submissions of proposals. Community partners and stakeholders are encouraged to submit. The theme of the conference is *Mission Possible: All Systems Go!*

Tonier Cain, a person with cross-agency lived experience, has been confirmed as one of the keynotes. We will also be offering a screening of the documentary about her life. Liz Manley, former director of system of care in New Jersey, will provide a keynote as a well as facilitated technical assistance on expanding and sustaining Texas System of Care. Additionally, Ms. Ledlow noted that two pre-conferences (CLAS Policy Academy and Collaborative and Practice Solutions) will be offered.

Needs and Capacity Assessment: Kisha Ledlow
Ms. Ledlow announced that HHSC released a broadcast message yesterday related to the release of the 2019 Needs and Capacity Assessment for communities who are interested in becoming system of care expansion sites. An informational webinar will be held next week to enable interested participants to learn more and ask questions. The deadline for the Needs and Capacity Assessment is May 10.

Agenda Item 12: Public Comments
No requests for public comment received.

Agenda Item 13: Next Steps
Next Meeting will be July 10, 2019 at 10:00 am at 909 W. 45th Street, Room 164.

When asked for agenda topics for the next meeting, members indicated that it might be useful to have an update on the legislation that passed. Ron Kimball

suggested that the Texas Council or HHSC be invited to present on legislative updates.

Ms. Granger noted that this is Dr. Lopez' last meeting as co-chair. Dr. Lori Robinson will take over as co-chair at the next meeting and Dr. Lopez will continue in the role as a member. Ms. Granger expressed her appreciation on behalf of CYBHS for the years of work Dr. Lopez has contributed to CYBHS in her role as co-chair.

The meeting adjourned at 3:05 pm.

Appendix
Sustainability of System of Care Activity

The responses to *Question 1a: How is financing organized across system for children and youth with mental health challenges?* as recorded were:

- Insurance (private, public, Medicaid/CHIP)
- Grants (SAMHSA, Private foundations, discretionary)
- GR funds (HHSC, TJJD, TDCJ, DFPS, TEA)
- MH block grant
- Local dollars (city/county)
- Donations (board members, citizens)
- Medicaid
- LMHAs
- DFPS (PEI)
- DSHS (ECI)
- TEA; ISDs (inc. child dev BG) (fed grants like project AWARE)
- ESCs
- HHSC (MHBG, GR, federal grants) (MCOs) (LOC RTC) (CMS) (State hospital + WCY)
- TJJD
- CHIP
- TCOOMMI
- Medicaid waivers (e.g. YES)
- Foundations (e.g. Hopes, Hogg)
- State supported living centers
- Superior health plan grants

The responses to *Question 1b: Who controls financing policies?* As recorded were:

- Legislation (Fed/State)
- Donor (e.g. FDN, citizen)
- Recipients determine parts
- Boards of local and state agencies and non-profits
- Professional associations
- Parents
- Civically active community members
- Corporations; pharms
- State agency physicians
- Needs/Gaps
- Legislature
- Texas legislature and feds

The responses to *Question 2: How are we redirecting $$ from deep-end spending? (e.g. from out of home placements to home and community based services)* as recorded were:
- Respites
- TJJD Diversion
- Family First Act
- YES Waiver
- GR Set-asides
- HMOS/MCOs-cost savings shifts
- TJJD to local probation departments
- YES waiver
- High fidelity wraparound
- Training and TA on best practices
- Prevention services
- CSC $$
- Using established networking pathways (groups) and existing internet presence to build further awareness of SOC – building better understanding even among main entities

The responses to *Question 3: How are we addressing non-fiscal needs required to expand and sustain TxSOC, including policies that affect financing? (e.g. policy changes, training/TA, etc)* as recorded were:
- Policy recs to BEHAC
- Conferences/summits/webinar
- Toolkits
- Evaluations
- MOU
- YPS/Workforce dev subcommittee
- Connections/Networks/Relationships
- Developing local capacity for training/sustainability
- ACCEPT/TxFVN
- High fidelity wraparound
- Training on EBPs
- Legislation on TxSOC
- LOC TAY and workgroup
- FEP programming
- TxSOC communications
- USAC
- CRCG collaboration (inc MOU language)
- CYBHS
- SOC MOU
- TxSOC/CRCG conference
- YPS Roundtable + YPS development
- SOC toolkit
- LMHA req for CFP
- TxSOC TA and support to local communities

- ACCEPT and TxFVN
- LOC RTC collaboration and programming
- Local TxSOC collab w/DFPS + TJJD for continuity of care
- Continue to increase family and youth voice/leaders/advocates across systems and beyond just administrative understanding, but at every level