Form O

Consolidated Local Service Plan

Local Mental Health Authorities and Local Behavioral Health Authorities

Fiscal Years 2022-2023

Submissions should be sent to:

Performance.Contracts@hhsc.state.tx.us and CrisisServices@hhsc.state.tx.us

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Introduction

The Consolidated Local Service Plan (CLSP) encompasses all service planning requirements for local mental health authorities (LMHAs) and local behavioral health authorities (LBHAs). The CLSP has three sections: Local Services and Needs, the Psychiatric Emergency Plan, and Plans and Priorities for System Development.

The CLSP asks for information related to community stakeholder involvement in local planning efforts. The Health and Human Services Commission (HHSC) recognizes that community engagement is an ongoing activity and input received throughout the biennium will be reflected in the local plan. LMHAs and LBHAs may use a variety of methods to solicit additional stakeholder input specific to the local plan as needed. In completing the template, please provide concise answers, using bullet points. Only use the acronyms noted in Appendix B and language that the community will understand as this document is posted to LMHAs and LBHAs' websites. When necessary, add additional rows or replicate tables to provide space for a full response.

Section I: Local Services and Needs

I.A Mental Health Services and Sites

- In the table below, list sites operated by the LMHA or LBHA (or a subcontractor organization) providing mental health services regardless of funding. Include clinics and other publicly listed service sites. Do not include addresses of individual practitioners, peers, or individuals that provide respite services in their homes.
- Add additional rows as needed.
- List the specific mental health services and programs provided at each site, including whether the services are for adults, adolescents, and children (if applicable):
 - Screening, assessment, and intake
 - Texas Resilience and Recovery (TRR) outpatient services: adults, adolescents, or children
 - Extended Observation or Crisis Stabilization Unit
 - o Crisis Residential and/or Respite
 - Contracted inpatient beds
 - Services for co-occurring disorders

- Substance abuse prevention, intervention, or treatment
- Integrated healthcare: mental and physical health
- Services for individuals with Intellectual Developmental Disorders (IDD)
- Services for youth
- Services for veterans
- Other (please specify)

Operator (LMHA/LBHA or Contractor Name)	Street Address, City, and Zip, Phone Number	County	Services & Target Populations Served
Bluebonnet Trails Community Services (BTCS)	Bastrop Community Health Center 275 Jackson Street Bastrop, TX 78602 (512) 321-7250	Bastrop County	 Autism Treatment Mental Health (MH) Services Employment Services Crisis Services Early Childhood Intervention Integrated Primary, Dental and Behavioral Health Care

Operator (LMHA/LBHA or Contractor Name)	Street Address, City, and Zip, Phone Number	County	Services & Target Populations Served
			 Intellectual Developmental Disabilities (IDD) Evaluations, Service Coordination and Services Justice-Involved Services Texas Commission on Offenders with Medical and Mental Impairments (TCOOMMI) Program Services Jail Diversion Services Medication Assisted Treatment Mental Health Deputy Program Peer Support Services Substance Use Treatment Supportive and Supported Housing Services Outreach Screening Assessment and Referral (OSAR) Services
Bastrop ISD	1602 Hill Street Bastrop, TX 78602 (512) 772-7100	Bastrop County	 Integrated Health Clinic (Primary Care and Behavioral Health Care) Counseling Services Family Partner Services Case Management Services COPSD Treatment
Cedar Creek ISD	793 Union Chapel Road Cedar Creek, TX 78612 (512) 772-7300	Bastrop County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
Elgin ISD	711 W. 10 th Street Elgin, TX 78621 (512) 281-9774	Bastrop County	 Integrated Health Clinic (Primary Care and Behavioral Health Care) Counseling Services

Operator (LMHA/LBHA or Contractor Name)	Street Address, City, and Zip, Phone Number	County	Services & Target Populations Served
			Family Partner ServicesCase Management ServicesCOPSD Treatment
Smithville ISD	801 Wilkes Street Smithville, TX 78957 (512) 237-2487	Bastrop County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
BTCS	4606 Innovation Loop Marble Falls, TX 78654 (830) 798-2902	Burnet	 Autism Treatment MH Services Employment Services Crisis Services Early Childhood Intervention Intellectual Developmental Disabilities (IDD) Evaluations, Service Coordination and Services Medication Assisted Treatment Supported and Supported Housing Services Justice-Involved Services Texas Commission on Offenders with Medical and Mental Impairments (TCOOMMI) Program Services Peer Support Services Substance Use Treatment OSAR
Burnet CISD	208 East Brier Burnet, TX 78611 (512) 756-2124	Burnet County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment

Operator (LMHA/LBHA or Contractor Name) Marble Falls ISD	Street Address, City, and Zip, Phone Number 2101 Mustang Drive	County	Services & Target Populations Served • Counseling Services
	Marble Falls, TX 78654 (830) 693-4357	County	Family Partner ServicesCase Management ServicesCOPSD Treatment
Lockhart Integrated Health Center	2060 South Colorado Street Lockhart, TX 78644 (512) 398-9610	Caldwell	 Autism Treatment MH Services Employment Services Crisis Services Dental Services Early Childhood Intervention Integrated Primary, Dental and Behavioral Health Care Intellectual Developmental Disabilities (IDD) Evaluations, Service Coordination and Services Justice-Involved Services Medication Assisted Treatment Texas Commission on Offenders with Medical and Mental Impairments (TCOOMMI) Program Services OSAR Peer Support Services Substance Use Treatment Supportive and Supported Housing Services
Lockhart ISD	906 Center Street Lockhart, TX 78644 (512) 398-0000	Caldwell County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment

Operator (LMHA/LBHA or Contractor Name) Luling ISD	Street Address, City, and Zip, Phone Number 214 E Bowie Street	County	Services & Target Populations Served • Counseling Services
J	Luling, TX 78648 (830) 875-3191	County	Family Partner ServicesCase Management ServicesCOPSD Treatment
Prairie Lea ISD	6910 San Marcos Hwy Prairie Lea, TX 78661 (512) 488-2370	Caldwell County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
Elgin Clinic @ Elgin ISD	902 W. 2 nd Street Elgin, TX 78621 (512) 229-3334	Bastrop County	 Family Health Care Clinic providing primary, dental and behavioral health care to students, families and community members
McDade ISD	156 Marlin Street McDade, TX 78650 (512) 273-2522	Bastrop County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
BTCS	La Grange MH and IDD Center 750 West Travis St La Grange, TX 78945 (979) 968-3711	Fayette County	 Autism Treatment MH Services Employment Services Family Health Care Clinic Crisis Services Early Childhood Intervention Intellectual Developmental Disabilities (IDD) Evaluations, Service Coordination and Services Medication Assisted Treatment Justice-Involved Services OSAR Peer Support Services

Operator (LMHA/LBHA or Contractor Name)	Street Address, City, and Zip, Phone Number	County	Services & Target Populations Served
			 Substance Use Treatment Supportive and Supported Employment Texas Correctional Office on Offenders with Medical or Mental Impairments (TCOOMMI) Services
Fayetteville ISD	618 N. Rusk Fayetteville, TX 78940 (979) 378-4242	Fayette County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
Flatonia ISD	400 E 4th St, Flatonia, TX 78941 (361) 865-2941	Fayette County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
La Grange ISD	820 South Vail Street La Grange, TX 78945 (979) 968-7000	Fayette County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
Roundtop Carmine ISD	608 North Washington Round Top, TX 78954 (979) 249-3200	Fayette County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
Schulenburg ISD	521 Shorthorn Drive Schulenburg, TX 78956 (979) 743-3448	Fayette County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
BTCS	Gonzales Community Health Center 228 Saint George Street Gonzales, TX 78629	Gonzales County	 Autism Treatment MH Services Employment Services Crisis Services Dental Services

Operator (LMHA/LBHA or Contractor Name)	Street Address, City, and Zip, Phone Number	County	Services & Target Populations Served
	(830) 672-7975		 Integrated Primary, Dental and Behavioral Health Care Early Childhood Intervention Intellectual Developmental Disabilities (IDD) Evaluations, Service Coordination and Services Medication Assisted Treatment Supported and Supported Housing Services Peer Support Services Substance Use Treatment
Gonzales ISD	1801 N Sarah Dewitt Dr Gonzales, TX 78629 (830) 672-9551	Gonzales County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
Nixon-Smiley CISD	800 N Rancho Rd Nixon, TX 78140 (830) 582-1536	Gonzales County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
BTCS	Seguin Family Health Center 1104 Jefferson Ave Seguin, TX 78155 (830) 386-2700	Guadalupe County	 Autism Treatment MH Services Employment Services Crisis Services Dental Services Intellectual Developmental Disabilities (IDD) Evaluations, Service Coordination and Services Justice-Involved Services Medication Assisted Treatment Texas Commission on Offenders with Medical and Mental Impairments (TCOOMMI) Program Services

Operator (LMHA/LBHA or Contractor Name)	Street Address, City, and Zip, Phone Number	County	Services & Target Populations Served
			 Integrated Primary, Dental and Behavioral Health Care Mental Health Deputy Program Peer Support Services Substance Use Treatment Supportive and Supported Housing Services
Marion ISD	211 West Otto Street Marion, TX 78124 (830) 914-1060	Guadalupe County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
Navarro ISD	6450 TX-123 Seguin, TX 78155 (830) 372-1930	Guadalupe County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
Schertz/Cibolo/Universal City ISDs	1001 Elbel Road Schertz, TX 78154 (210) 945-6200	Guadalupe County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
Seguin ISD	1315 E Cedar Street Seguin, TX 78155 (830) 401-8600	Guadalupe County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
BTCS	Giddings Family Health Center 849 E Industry Street Giddings, TX 78942 (979) 542-3042	Lee County	 Autism Treatment MH Services Employment Services Crisis Services Early Childhood Intervention Family Health Care

Operator (LMHA/LBHA or Contractor Name)	Street Address, City, and Zip, Phone Number	County	Services & Target Populations Served
Giddings ISD Lexington ISD	2337 N. Main Street Giddings, TX 78942 (979) 542-2854 8731 N HWY 77 Lexington, TX 78947 (979) 773-2254	Lee County Lee County	 Intellectual Developmental Disabilities (IDD) Evaluations, Service Coordination and Services Medication Assisted Treatment Justice-Involved Services Texas Commission on Offenders with Medical and Mental Impairments (TCOOMMI) Program Services Peer Support Services Primary Care Substance Use Treatment Counseling Services Family Partner Services Case Management Services Counseling Services Tamily Partner Services Case Management Services Case Management Services Case Management Services
BTCS	San Gabriel Crisis Center 711 North College Street Georgetown, TX 78626 (512) 869-2650	Williamson County	 COPSD Treatment Adult Crisis Respite Unit (16 bed unit) Crisis Services Family Health Care Medication Assisted Treatment & Ambulatory Detoxification Services OSAR Peer Support Services Substance Use Treatment
BTCS	1009 North Georgetown Street	Williamson County	Autism TreatmentMH Services

Operator (LMHA/LBHA or Contractor Name)	Street Address, City, and Zip, Phone Number	County	Services & Target Populations Served
	Round Rock, Texas 78664 (512) 255-1720		 Employment Services Crisis Services Early Childhood Intervention Intellectual Developmental Disabilities (IDD) Evaluations, Service Coordination and Services Justice-Involved Services Medication Assisted Treatment Texas Commission on Offenders with Medical and Mental Impairments (TCOOMMI) Program Services OSAR Peer Support Services Primary Care School-based Services at Round Rock ISD Substance Use Treatment Supportive and Supported Housing Services
BTCS	Cedar Park Clinic 1401 Medical Pkwy, BLDG C Suite 300 Cedar Park, TX 78613 (512) 259-1811	Williamson County	 Autism Treatment MH Services Crisis Services Early Childhood Intervention Family Health Care Intellectual Developmental Disability (IDD) Evaluations, Service Coordination and Services Medication Assisted Treatment
BTCS	Taylor Clinic	Williamson County	MH ServicesFamily Health Care

Operator (LMHA/LBHA or Contractor Name)	Street Address, City, and Zip, Phone Number	County	Services & Target Populations Served
	404 Carlos G Parker Blvd NW Taylor, TX 76574 (512) 365-1600		 Medication Assisted Treatment Substance Use Treatment
Bartlett ISD	404 N Robinson Street Bartlett, TX 76511 (254) 527-4247	Williamson County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
Coupland ISD	620 S Commerce Street Coupland, TX 78615 (512) 856-2422	Williamson County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
Florence ISD	306 College Ave Florence, TX 76527 (254) 793-2850	Williamson County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
Georgetown ISD	507 E University Ave Georgetown, TX 78626 (512) 943-5000	Williamson County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
Granger ISD	302 N. Colorado Granger, TX 76530 (512) 859-2221	Williamson County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
Hutto ISD	200 College Street Hutto, TX 78634 (512) 759-3771	Williamson County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment

Operator (LMHA/LBHA or Contractor Name)	Street Address, City, and Zip, Phone Number	County	Services & Target Populations Served
Family Health Clinic @ Jarrell ISD	301 E Avenue F Jarrell, TX 76537 (844) 309-6385	Williamson County	 Family Health Care Counseling Services Family Partner Services Case Management Services COPSD Treatment
Leander ISD	410 S W Drive Leander, TX 78641 (512) 570-0000	Williamson County	 Case Management Services Counseling Services Family Partner Services Case Management Services COPSD Treatment
Liberty Hill ISD	301 Forrest Street Liberty Hill, TX 78642 (512) 260-5580	Williamson County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
Round Rock ISD	201 Deep Wood Drive Round Rock, TX 78681 (512) 464-6000	Williamson County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
Taylor ISD	3101 N Main Street Taylor, TX 76574 (512) 365-8089	Williamson County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
Thorndale ISD	300 N Main Street Thorndale, TX 76577 (512) 898-2538	Williamson County	 Counseling Services Family Partner Services Case Management Services COPSD Treatment
Thrall ISD	201 S Bounds Street Thrall, TX 76578 (512) 898-0062	Williamson County	Counseling ServicesFamily Partner ServicesCase Management Services

Operator (LMHA/LBHA or Contractor Name)	Street Address, City, and Zip, Phone Number	County	Services & Target Populations Served
La Esperanza Respite Unit	1104 Jefferson Ave Seguin, TX 78155 (830) 386-2700		 COPSD Treatment Adult Crisis Respite Unit (10 bed unit) Crisis Services OSAR Peer Support Services Substance Use Treatment
Diversion Center			 Crisis Services Law Enforcement Triage 23-Hour Observation OSAR Peer Support Services Substance Use Treatment
Youth Therapeutic Respite Program	1009 N Georgetown St; Round Rock, TX 78664	Williamson County	 Youth Crisis Respite Unit (16 bed unit) OSAR Substance Use Treatment
Outreach, Screening, Assessment and Referral (OSAR)	30 County service area with offices in multiple locations	Region 7: Bell, Blanco, Bosque, Brazos, Burleson, Coryell, Falls, Freestone, Grimes, Hamilton, Hays, Hill, Lampasas, Leon,	Persons seeking inpatient or outpatient substance use treatment

Operator (LMHA/LBHA or Contractor Name)	Street Address, City, and Zip, Phone Number	County	Services & Target Populations Served
		Limestone,	
		Llano,	
		Madison,	
		McLennan,	
		Milam,	
		Mills,	
		Robertson,	
		San Saba,	
		Travis, and	
		Washington	
		Counties	

I.B Mental Health Grant Program for Justice Involved Individuals

The Mental Health Grant Program for Justice-Involved Individuals is a grant program authorized by Senate Bill (S.B.) 292, 85th Legislature, Regular Session, 2017, to reduce recidivism rates, arrests, and incarceration among individuals with mental illness, as well as reduce the wait time for individuals on forensic commitments. These grants support community programs by providing behavioral health care services to individuals with a mental illness encountering the criminal justice system and facilitate the local cross-agency coordination of behavioral health, physical health, and jail diversion services for individuals with mental illness involved in the criminal justice system.

In the table below, describe the LMHA or LBHA S.B. 292 projects; indicate N/A if the LMHA or LBHA does not receive funding. Add additional rows if needed.

Fiscal Year	Project Title (include brief description)	County(s)	Population Served	Number Served per Year
FY19- 23	Mental Health Deputy Project	Bastrop, Burnet, Fayette, Guadalupe	Children, adolescents and adults with at least one interaction with the criminal justice system and who have mental health needs, cooccurring psychiatric and substance use needs, or cooccurring mental health and developmental needs.	Target: 1000
FY19- 23	Forensic Assertive Community Treatment Project	Burnet and Guadalupe	Children, adolescents and adults with at least one interaction with the criminal justice system and who have mental health needs, cooccurring psychiatric and substance use needs, or cooccurring mental health and developmental needs.	Target: 50

I. C Community Mental Health Grant Program - Projects related to Jail Diversion, Justice Involved Individuals, and Mental Health Deputies

The Community Mental Health Grant Program is a grant program authorized by House Bill (H.B.) 13, 85th Legislature, Regular Session, 2017. H.B. 13 directs HHSC to establish a state-funded grant program to support communities providing and coordinating mental health treatment and services with transition or supportive services for persons experiencing mental illness. The Community Mental Health Grant Program is designed to support comprehensive, data-driven mental health systems that promote both wellness and recovery by funding community-partnership efforts that provide mental health treatment, prevention, early intervention, and/or recovery services, and assist with persons with transitioning between or remaining in mental health treatment, services, and supports.

In the table below, describe the LMHA or LBHA H.B. 13 projects related to jail diversion, justice involved individuals and mental health deputies; indicate N/A if the LMHA or LBHA does not receive funding. Add additional rows if needed.

Fiscal Year	Project Title (include brief description)	County	Population Served	Number Served per Year
FY18- 23	Acute Crisis Project: Diversion Center	Williamson	Uninsured or underinsured adults in acute crisis who can benefit from crisis triage and short-term rapid stabilization	Target: 336

I.D Community Participation in Planning Activities

Identify community stakeholders who participated in comprehensive local service planning activities.

	Stakeholder Type		Stakeholder Type
\boxtimes	Consumers	\boxtimes	Family members
\boxtimes	Advocates (children and adult)		Concerned citizens/others
	Local psychiatric hospital staff *List the psychiatric hospitals that participated: Georgetown Behavioral Health Institute Rock Springs Hospital		State hospital staff *List the hospital and the staff that participated:
	Mental health service providers	\boxtimes	Substance abuse treatment providers
	Prevention services providers	\boxtimes	Outreach, Screening, Assessment, and Referral Centers
	 County officials *List the county and the official name and title of participants: Inclusive of the following for Bastrop, Burnet, Caldwell, Fayette, Gonzales, Guadalupe, Lee and Williamson Counties: Williamson County Court at Law		City officials *List the city and the official name and title of participants:

Stakeholder Type

Stakeholder Type

- Gonzales County Assistant Attorney, Keri Miller
- Williamson County Sheriff Mike Gleason
- Williamson County: 26th District Court Judge Donna King and 227th District Court Judge Stacey Mathews
- Bastrop & Lee Counties: 335th
 Judicial District Court Judge Reva
 Towslee-Corbett and 21st Judicial
 District Court Judge Carson
 Campbell
- o Bastrop County Judge Paul Pape
- Bastrop County Sheriff Maurice Cook
- Burnet County JP Precinct 1, Roxanne Nelson
- Williamson County Commissioner Terry Cook (Precinct 1)
- Williamson County Commissioner Cynthia Long (Precinct 2)
- Williamson County Commissioner Valerie Covey (Precinct 3)
- Burnet County Sheriff, Calvin Boyd
- Guadalupe County Sheriff, Arnold Zwicke
- Guadalupe County District Attorney, David Willborn

Stakeholder Type

Stakeholder Type

- Gonzales County Judge Patrick Davis
- Gonzales County Sheriff Robert Ynclan
- Lee County Judge Paul Fischer
- Lee County District Attorney, Martin Placke
- Lee County JP Precinct 2, Michael York
- Burnet County Jail Administrator,
 Captain Matt Kimbler
- Williamson County EMS Director, Chris Connealy
- Williamson County Adult Probation: Jameson Pennington, Director of Community Supervision and Corrections
- Williamson County Juvenile Services Executive Director, Scott Matthew
- Williamson County Juvenile Services Deputy Executive Director, Matt Smith
- Burnet County Juvenile Probation, Marc Bittner
- Guadalupe County Juvenile Probation Director, Ron Quiros

	Stakeholder Type		Stakeholder Type
	Federally Qualified Health Center and other primary care providers		Local health departments LMHAs/LBHAs *List the LMHAs/LBHAs and the staff that participated: • Andrea Richardson, Executive Director • Dr. Mark Janes, Chief Medical Officer • Mike Maples, Chief Health Programs Officer • Janet Brunette, Chief Developmental Services Officer • Tiffany Guerrero, Chief Administrative Officer • Jonathan Lemuel, Director of Forensic Services • Jack Housworth, Director of Substance Use Services • Maria Kapadia, Director of Care Coordination • Christina Manley, Director of Integrated Healthcare Programs • Amanda Coleman, Director of Crisis Services • Dalia Villa, Director of Crisis Services • Meghan Nadolski, Director of Quality Management
\boxtimes	Hospital emergency room personnel	\boxtimes	Emergency responders
\boxtimes	Faith-based organizations	\boxtimes	Community health & human service providers
\boxtimes	Probation department representatives	\boxtimes	Parole department representatives

	Stakeholder Type		Stakeholder Type
	Court representatives (Judges, District Attorneys, public defenders) *List the county and the official name and title of participants: • Inclusive of the following for Bastrop, Burnet, Caldwell, Fayette, Gonzales, Guadalupe, Lee and Williamson Counties: • County Attorney • District Attorney • Magistrates • District Judges • Public Defenders • DFPS Representatives • Veterans Affairs		 *List the county/city and the official name and title of participants: Representatives from all Sheriff's Offices and local Police Departments in Bastrop, Burnet, Caldwell, Fayette, Gonzales, Guadalupe Lee and Williamson Counties Mental Health Deputy Programs through Sheriff's Offices in Burnet, Fayette, Bastrop and Guadalupe Counties
\boxtimes	Education representatives	\boxtimes	Employers/business leaders
\boxtimes	Planning and Network Advisory Committee	\boxtimes	Local consumer peer-led organizations
\boxtimes	Peer Specialists	\boxtimes	IDD Providers
\boxtimes	Foster care/Child placing agencies	\boxtimes	Community Resource Coordination Groups
\boxtimes	Veterans' organizations		Other:

Describe the key methods and activities used to obtain stakeholder input over the past year, including efforts to ensure all relevant stakeholders participate in the planning process.

- Facilitation of and participation in County Behavioral Health Task Force Meetings
- Collaboration with local Independent School Districts
- Participation in SIM subgroup meetings with Williamson County Law Enforcement and Emergency Departments

- Coordination of and participation in SIM mapping exercises in Williamson (March 2022) and Caldwell Counties (September 2021)
- Needs Assessment conducted in April 2022 to include client interviews, windshield tour and data comparison
- Feedback and strategic planning meetings held with all Independent School Districts in Williamson County
- Facilitation of and Participation in Quarterly OSAR Provider Meetings
- Participation in Suicide Prevention Workgroups & Initiatives
- Regular leadership meetings with partnering FQHC
- Participation in Regional Planning Network Advisory Committee Meetings
- Participation in Commissioner's Court meetings
- Monthly meetings with Law Enforcement, EMS and First Responders
- Monthly meetings with Private Psychiatric Hospitals
- Meetings with county officials, court representatives, probation/parole departments, and Juvenile Services
- Participation in State Hospital Service Area Regional Planning Meetings
- Participation on HHSC Special Interest Groups
- Satisfaction surveys from individuals receiving services

List the key issues and concerns identified by stakeholders, including <u>unmet</u> service needs. Only include items raised by multiple stakeholders and/or had broad support.

- Limited funding for local crisis stabilization alternatives to the state hospital in our communities. Specifically, the BTCS catchment area needs additional dollars for Private Psychiatric Beds, residential treatment options for children, and residential substance use treatment/detoxification options.
- Transportation in our service areas continues to be of concern to Stakeholder groups
- There is a need for additional resources to facilitate jail and emergency room diversion
- Mental Health Deputy programs

Section II: Psychiatric Emergency Plan

The Psychiatric Emergency Plan is intended to ensure stakeholders with a direct role in psychiatric emergencies have a shared understanding of the roles, responsibilities, and procedures enabling them to coordinate efforts and effectively use available resources. The Psychiatric Emergency Plan entails a collaborative review of existing crisis response activities and development of a coordinated plan for how the community will respond to psychiatric emergencies in a way that is responsive to the needs and priorities of consumers and their families. The planning effort also provides an opportunity to identify and prioritize critical gaps in the community's emergency response system.

The following stakeholder groups are essential participants in developing the Psychiatric Emergency Plan:

- Law enforcement (police/sheriff and jails)
- Hospitals/emergency departments
- Judiciary, including mental health and probate courts
- Prosecutors and public defenders
- Other crisis service providers (to include neighboring LMHAs and LBHAs)
- Users of crisis services and their family members
- Sub-contractors

Most LMHAs and LBHAs are actively engaged with these stakeholders on an ongoing basis, and the plan will reflect and build upon these continuing conversations.

Given the size and diversity of many local service areas, some aspects of the plan may not be uniform across the entire service area. If applicable, include separate answers for different geographic areas to ensure all parts of the local service area are covered.

II.A Development of the Plan

Describe the process implemented to collaborate with stakeholders to develop the Psychiatric Emergency Plan, including, but not limited to, the following:

Ensuring all key stakeholders were involved or represented, to include contractors where applicable;

- Bluebonnet Trails Community Services (BTCS) has been actively engaged with community stakeholders for years and continues to meet regularly with Behavioral Health Task Force Groups in Bastrop, Burnet, Fayette, Guadalupe and Williamson Counties.
- Bastrop, Caldwell, Gonzales, and Lee Counties are engaged with Jail Diversion Staff, Crisis Staff and Senior Management Staff to review and collaborate on the crisis system of care. There are ongoing case reviews with local courts and law enforcement agencies.
- Key stakeholders are Law Enforcement (local police and sheriff's departments including Mental Health Deputies), County Commissioners, Judicial Officials (Judges, District and County Attorney's office), local ED/Hospital Personnel, and Private Psychiatric Hospitals.

Ensuring the entire service area was represented; and

• The BTCS Board of Trustees is assigned by the County Judge and the eight (8) members represent all BTCS services areas and counties. Additionally, our assigned members are joined by the Sheriff in Guadalupe County, Williamson County and the Sheriff in Burnet County as Ad Hoc members.

Soliciting input.

• BTCS utilizes satisfaction surveys to collect feedback from individuals in services. Survey responses are collated, and feedback is provided to the programs.

II.B Utilization of the Crisis Hotline, Role of Mobile Crisis Outreach Teams (MCOT), and the Crisis Response Process

1. How is the Crisis Hotline staffed?

During business hours

• The hotline is staffed around the clock with Qualified Mental Health Professionals.

After business hours

• The hotline is staffed around the clock with Qualified Mental Health Professionals.

Weekends/holidays

- The hotline is staffed around the clock with Qualified Mental Health Professionals.
- 2. Does the LMHA/LBHA have a sub-contractor to provide the Crisis Hotline services? If, yes, please list the contractor:
 - Avail Solutions, Inc.
- 3. How is the MCOT staffed?

During business hours

- MCOT Staff are located in Burnet, Bastrop, Caldwell, and Guadalupe Counties Monday thru Friday from the hours of 8 AM until 5 PM.
- MCOT Staff are located in Williamson County Monday through Sunday from the hours of 8 AM until 6 AM.

After business hours

- On Call Contract staff along with Center staff take call afterhours and are located in Bastrop, Burnet, Caldwell, Fayette, Gonzales, Guadalupe and Lee Counties. Afterhours crisis screening and recommendations are provided as needed from 5 PM until 8 AM.
- In Williamson County MCOT staff provide on call crisis support and intervention from the hours of 8 PM until 8 AM, Monday through Sunday.

Weekends/holidays

• BTCS MCOT staff and/or contractors provide, on call crisis support and intervention on weekends and holidays, including the evening/overnight hours.

- 4. Does the LMHA/LBHA have a sub-contractor to provide MCOT services? If yes, please list the contractor:
 - We have four independent individual clinicians with whom we contract with for Crisis MCOT services.
- 5. Provide information on the type of follow up MCOT provides (phone calls, face to face visits, case management, skills training, etc.).
 - Upon completion of the crisis assessment, MCOT identifies and links people to all available services necessary to stabilize the behavioral health crisis and ensure transition to routine care. This includes assistance with accessing those services if needed.
 - Upon the resolution of the crisis episode which involves a person safety planning in the community, MCOT provides follow up care within 24 hours.
 - Individuals are placed into Transitional Services as needed to continue to support and transition individuals to existing community resources or local Bluebonnet Trails Community Services.
 - Both Face to Face and Telephone follow-up services are provided.
 - We have a dedicated Nurse Practitioner and Addiction Psychiatrist assigned to help begin treatment and provide a psychiatric evaluation to adults in any county.
- 6. Do emergency room staff and law enforcement routinely contact the LMHA/LBHA when an individual in crisis is identified? If so, please describe MCOT's role for:

Emergency Rooms:

• Emergency Rooms contact MCOT 24/7. We are considered "crisis consultants" and provide crisis evaluations, support and recommendations. We are able to help secure an inpatient bed as needed in our own Diversion Center or in our Crisis Respite Units. We can also arrange private psychiatric beds or State Hospital inpatient beds as appropriate.

Law Enforcement:

- We provide crisis evaluation and crisis support 24/7. We are able to arrange inpatient beds as needed in our own Diversion Center or in our Crisis Respite Units. We can also arrange private psychiatric beds or State Hospital inpatient beds as appropriate.
- 7. What is the process for MCOT to respond to screening requests at state hospitals, specifically for walkins?
 - BTCS has not been contacted to respond to screening requests at the state hospitals.
 - However, BTCS can easily provide this service via televideo and coordinate necessary services.
- 8. What steps should emergency rooms and law enforcement take when an inpatient level of care is needed?

During business hours:

- The ER or Law Enforcement entity may engage MCOT 24/7 through our crisis hotline: 1-800-841-1255. In Williamson County, Law Enforcement may also access our 24-hour Diversion Center.
- Once we have completed an assessment, we assist with accessing the recommended level of care, including inpatient options when appropriate.
- A doctor-to-doctor review is required for emergency room transfers to an inpatient psychiatric facility.
- If involuntary commitment is needed, the hospital or BTCS may motion the local courts for an emergency detention or request law enforcement to review and consider an emergency detention order without a warrant by a judge.
- If the individual is willing to go to treatment on a voluntary basis, we help arrange transportation or provide the transportation.

After business hours:

Same as above

Weekends/holidays:

- Same as above
- 9. What is the procedure if an individual cannot be stabilized at the site of the crisis and needs further assessment or crisis stabilization in a facility setting?
 - BTCS may request assistance from family or law enforcement to bring the individual to a safe location for further assessment, such as our Diversion Center or Crisis Respite Units.
 - If law enforcement is already onsite and BTCS is not, law enforcement may call our Crisis Hotline (1-800-841-1255) to consult with the On Call Worker who can provide instruction and meet the officer at an appropriate facility for evaluation.
- 10. Describe the community's process if an individual requires further evaluation and/or medical clearance.
 - We provide crisis support while we are securing an inpatient bed at a private or public facility.
 - Bluebonnet Trails is able to secure beds at our Diversion Center in Georgetown. We are able to accept Emergency Detention orders and/or voluntary admissions. We also have 26 respite beds for adults and 16 Youth Therapeutic Respite Program beds.
 - Individuals who are in an Emergency Department or general hospital and need a State Hospital bed are reassessed every 24 hours until bed space is secured.
 - If medical clearance is needed, the person is sent to the local Emergency Department for an evaluation.
- 11. Describe the process if an individual needs admission to a psychiatric hospital.
 - BTCS works closely with the client, any client supports, local law enforcement (if involuntary) and/or local
 emergency rooms to facilitate admission to an appropriate inpatient hospital. This includes but is not
 limited to: Calling local inpatient facilities to determine availability, completing telephonic intake with
 potential receiving locations, providing completed crisis assessment via secured fax to receiving location
 and arrange transport when necessary.
 - If a private hospital bed is appropriate, we call local psychiatric facilities to secure a bed. The admissions office will receive a brief review over the telephone and insurance information is reviewed. BTCS was awarded funding to purchase Private Psychiatric Beds (PPB) beginning April 1, 2018.

- For a State Hospital bed, we call either Austin State Hospital or San Antonio State Hospital and request admission after a brief review over the telephone. Wait lists vary. The State Hospital will call local Emergency Department or local hospital or Bluebonnet Trail Crisis Staff when a bed becomes available and the individual is transferred. During the wait period, BTCS assesses the person every 24 hours and advocates for treatment while they wait for a state bed.
- Information/ records are faxed to the inpatient facility during the review process.
- 12. Describe the process if an individual needs facility-based crisis stabilization (i.e., other than psychiatric hospitalization and may include crisis respite, crisis residential, extended observation, or crisis stabilization unit).
 - Families and local entities call our Crisis Hotline (1-800-841-1255) if a crisis evaluation is requested.
 - MCOT staff are activated by Avail Solutions (Hotline) 24/7 to complete an evaluation.
 - MCOT staff will call the on-call LPHA for the Extended Observation Unit or Crisis Respite Units to review and consider for admission. We have on-call staff available 24/7 to consider admissions afterhours.
 - If capacity exists and the person is appropriate for admission (no detox concern or severe medical issues) we admit or place on wait list for next available bed.
- 13. Describe the process for crisis assessments requiring MCOT to go into a home or alternate location such as a parking lot, office building, school, under a bridge or other community-based location.
 - The MCOT worker is dispatched in tandem with another MCOT Worker or a Mental Health Deputy when completing a crisis assessment for an unknown person who is not located in a place where other professional staff are present (i.e. home, parking lot, side of road). Local law enforcement presence may be requested for safety purposes, depending on the nature of the call when a Mental Health Deputy is not available. If the person in crisis is located in a BTCS clinic, school or hospital, the crisis worker may dispatch to the scene alone if circumstances indicate it is safe. Alternative locations may also be offered in the middle of the night, such as our 24-hour Diversion or Respite Centers.
- 14. If an inpatient bed at a psychiatric hospital is not available: Where does the individual wait for a bed?

- Bluebonnet Trails has Private Psychiatric Bed (PPB) subcontracts with seven psychiatric hospitals in the Greater Austin and San Antonio area, and we continue to seek additional partnerships to expand access to care. In the rare event all of hospitals are full or do not meet the needs of the person requiring care, we pursue single case agreements with other hospitals for our PPB bed rate. Occasionally, the state hospital will work with our liaison to open capacity for those most in need if a private psychiatric hospital is not sufficient to meet the needs of the person in crisis.
- Our Diversion Center and Crisis Respite Units may be utilized with 1:1 monitoring in some circumstances while a more intensive inpatient bed is secured.
- Emergency room facilities are sometimes utilized depending on the circumstances, but this is considered only as a temporary and last resort. We advocate for treatment while individuals are waiting in an emergency department for a more intensive level of care. Some emergency facilities have psychiatric consultation services available and provide treatment recommendations to attending physician. Bluebonnet Trails Community Services has a Tele-Psychiatry Service available for those facilities that do not have a psychiatric consultation service available. We have offered tele-psychiatry to all emergency facilities in our service areas.
- 15. Who is responsible for providing ongoing crisis intervention services until the crisis is resolved or the individual is placed in a clinically appropriate environment at the LMHA/LBHA?
 - Bluebonnet Trails Community Services MCOT and Jail Diversion Staff (if in jail)
 - BTCS staff reassess every 24 hours if the individual is waiting for a more intensive level of care. We explore all options and advocate for treatment while the individual is waiting.
- 16. Who is responsible for transportation in cases not involving emergency detention?
 - BTCS staff will often provide transportation. Reliable family members may also provide the transportation, when appropriate.
 - If the individual is admitted to an Emergency Department, the hospital will coordinate transport.
 - Mental Health Deputies have also provided courtesy rides when requested.
 - BTCS also contracts with a licensed security vendor for transportation in Williamson County.

Crisis Stabilization

What alternatives does the local service area have for facility-based crisis stabilization services (excluding inpatient services)? Replicate the table below for each alternative.

Name of Facility	Diversion Center
Location (city and county)	Georgetown Texas / Williamson County
Phone number	1-800-841-1255
Type of Facility (see Appendix A)	23-Hour Observation
Key admission criteria (type of individual accepted)	Adults with moderate to high risk of harm to self or others and may have moderate functional impairment.
Circumstances under which medical	Detox or severe health concerns such as uncontrolled B/P or
clearance is required before admission	uncontrolled seizure disorder.
Service area limitations, if any	This unit serves individuals from law enforcement who experience a
	crisis within our eight-county service area.
Other relevant admission information for first	None
responders	
Accepts emergency detentions?	Yes
Number of beds	10

Name of Facility	San Gabriel Adult Crisis Respite Unit
Location (city and county)	Georgetown Texas / Williamson County
Phone number	512-869-2650 (Front Desk)
	512-701-1982 (On-Call & After-Hour Line)
Type of Facility (see Appendix A)	Crisis Respite
Key admission criteria (type of individual accepted)	Adults with a Mental Health Disorder or Co-occurring Mental Health and Substance Use Disorders. Individuals must come voluntarily and have low risk of harm to self or others and may have some functional impairment. Person must also be able to administer their own medication and ambulate without intervention.

Name of Facility	San Gabriel Adult Crisis Respite Unit
Circumstances under which medical	Detox or severe health concerns such as uncontrolled B/P or
clearance is required before admission	uncontrolled seizure disorder.
Service area limitations, if any	Located close to a Child Care Center so those who have sexual offenses cannot be admitted into the program. Otherwise, this unit serves individuals who experience a crisis within our eight-county service area.
Other relevant admission information for first responders	If a person is prescribed medications, these medications must accompany the person in current, labeled bottles.
Accepts emergency detentions?	No
Number of beds	16

Name of Facility	La Esperanza Adult Crisis Respite Unit		
Location (city and county)	Seguin Texas / Guadalupe County		
Phone number	830-386-2770 (Front Desk)		
	830-386-2747 (On-Call and After-Hour Line)		
Type of Facility (see Appendix A)	Crisis Respite		
Key admission criteria (type of individual	Adults with a Mental Health Disorder, Co-occurring Mental Health and		
accepted)	Substance Use Disorder, and/or individuals with Intellectual and		
	Developmental Disabilities. Individuals must come voluntarily and		
	have low risk of harm to self or others and may have some functional		
	impairment. They must also be able to administer their own		
	medication and ambulate without intervention.		
Circumstances under which medical	Detox or severe health concerns such as uncontrolled B/P or		
clearance is required before admission	uncontrolled seizure disorder.		
Service area limitations, if any	Located close to a Child Care Center so those who have sexual offenses		
	cannot be admitted into the program. Otherwise, this unit serves		
	individuals who experience a crisis within our eight-county service		
	area.		
Other relevant admission information for first	If a person is prescribed medications, these medications must		
responders	accompany the person in current, labeled bottles.		

Name of Facility	La Esperanza Adult Crisis Respite Unit
Accepts emergency detentions?	No
Number of beds	10

Name of Facility	Youth Therapeutic Respite Program
Location (city and county)	Round Rock Texas / Williamson County
Phone number	1-800-841-1255
Type of Facility (see Appendix A)	Crisis Respite
Key admission criteria (type of individual accepted)	Ages 5-17 with a mental health, intellectual disability or autism diagnosis
Circumstances under which medical clearance is required before admission	Detox or severe health concerns such as uncontrolled B/P or uncontrolled seizure disorder.
Service area limitations, if any	This unit serves individuals who are experiencing a crisis within our eight-county service area. When capacity allows, we will support admissions from outside our area.
Other relevant admission information for first responders	If a person is prescribed medications, these medications must accompany the person in current, labeled bottles.
Accepts emergency detentions?	No
Number of beds	16

Inpatient Care

What alternatives to the state hospital does the local service area have for psychiatric inpatient care for uninsured or underinsured individuals? Replicate the table below for each alternative.

Name of Facility	Cedar Crest Hospital
Location (city and county)	Belton Texas / Bell County
Phone number	(254) 613-9871
Key admission criteria	Children, Adolescents and Adults with psychiatric symptoms/ suicidal ideation
Service area limitations, if any	None

Other relevant admission information	BTCS approval for funding is required prior to coordination of admission.
for first responders	
Number of Beds	68
Is the facility currently under contract	Yes
with the LMHA/LBHA to purchase	
beds?	
If under contract, is the facility	Private Psychiatric Beds
contracted for rapid crisis stabilization	
beds (funded under the Psychiatric	
Emergency Service Center contract or	
Mental Health Grant for Justice-	
Involved Individuals), private	
psychiatric beds, or community mental	
health hospital beds (include all that	
apply)?	
If under contract, are beds purchased as	As needed
a guaranteed set or on an as needed	
basis?	
If under contract, what is the bed day	\$625
rate paid to the contracted facility?	
If not under contract, does the	N/A
LMHA/LBHA use facility for single-case	
agreements for as needed beds?	
If not under contract, what is the bed	N/A
day rate paid to the facility for single-	
case agreements?	

Name of Facility	Cross Creek Hospital
Location (city and county)	Austin, Texas / Travis County
Phone number	(512) 215-3900
Key admission criteria	Children, Adolescents and Adults with psychiatric symptoms/ suicidal ideation
Service area limitations, if any	None

Other relevant admission information for first responders	BTCS approval for funding is required prior to coordination of admission.
Number of Beds	
Is the facility currently under contract with the LMHA/LBHA to purchase beds?	Yes
If under contract, is the facility contracted for rapid crisis stabilization beds (funded under the Psychiatric Emergency Service Center contract or Mental Health Grant for Justice-Involved Individuals), private psychiatric beds, or community mental health hospital beds (include all that apply)?	Private Psychiatric Beds
If under contract, are beds purchased as a guaranteed set or on an as needed basis?	As needed
If under contract, what is the bed day rate paid to the contracted facility?	\$625
If not under contract, does the LMHA/LBHA use facility for single-case agreements for as needed beds?	N/A
If not under contract, what is the bed day rate paid to the facility for single-case agreements?	N/A
Name of Facility	Georgetown Behavioral Health Institute
Location (city and county)	Georgetown Texas / Williamson County
Location (city and county)	Georgetown Texas / Williamson
Phone number	877-500-9151
Key admission criteria	Adolescents or Adults with Severe Psychiatric Symptoms / Suicide Ideation
Service area limitations, if any	None

Other relevant admission information for first responders	BTCS approval for funding is required prior to coordination of admission.
Number of Beds	118
Is the facility currently under contract	Yes
with the LMHA/LBHA to purchase	1 es
beds?	
If under contract, is the facility	Private Psychiatric Beds
contracted for rapid crisis stabilization	1 Tivate i Sycillati ic Deus
beds (funded under the Psychiatric	
Emergency Service Center contract or	
Mental Health Grant for Justice-	
Involved Individuals), private	
psychiatric beds, or community mental	
health hospital beds (include all that	
apply)?	
If under contract, are beds purchased	As needed
as a guaranteed set or on an as needed	
basis?	
If under contract, what is the bed day	\$625
rate paid to the contracted facility?	
If not under contract, does the	N/A
LMHA/LBHA use facility for single-	
case agreements for as needed beds?	
If not under contract, what is the bed	N/A
day rate paid to the facility for single-	
case agreements?	
Name of Facility	Rock Springs Hospital
Location (city and county)	Georgetown Texas / Williamson County
Phone number	(512) 942-0062
Key admission criteria	Adults with Psychiatric Symptoms / Suicidal Ideation

Service area limitations, if any	Uncontrolled physical issues like B/P and Seizure Disorderrequires medical clearance to admit.
Other relevant admission information	BTCS approval for funding is required prior to coordination of admission.
for first responders	
Number of beds	72
Is the facility currently under contract	Yes
with the LMHA/LBHA to purchase	
beds?	
If under contract, is the facility	Private Psychiatric Beds
contracted for rapid crisis stabilization	
beds (funded under the Psychiatric	
Emergency Service Center contract or	
Mental Health Grant for Justice-	
Involved Individuals), private	
psychiatric beds, or community mental	
health hospital beds (include all that	
apply)?	
If under contract, are beds purchased as	As needed
a guaranteed set or on an as needed	
basis?	
If under contract, what is the bed day	\$625
rate paid to the contracted facility?	
If not under contract, does the	N/A
LMHA/LBHA use facility for single-case	
agreements for as needed beds?	
If not under contract, what is the bed	N/A
day rate paid to the facility for single-	
case agreements?	

Name of Facility	Laurel Ridge Hospital
Location (city and county)	San Antonio Texas / Bexar County
Phone number	(210) 491-3526
Key admission criteria	Children, Adolescents and Adults with psychiatric symptoms/ suicidal ideation
Service area limitations, if any	None
Other relevant admission information	BTCS approval for funding is required prior to coordination of admission.
for first responders	
Number of Beds	250
Is the facility currently under contract	Yes
with the LMHA/LBHA to purchase	
beds?	
If under contract, is the facility	Private Psychiatric Beds
contracted for rapid crisis stabilization	
beds (funded under the Psychiatric	
Emergency Service Center contract or	
Mental Health Grant for Justice-	
Involved Individuals), private	
psychiatric beds, or community mental	
health hospital beds (include all that	
apply)?	As needed
If under contract, are beds purchased as a guaranteed set or on an as needed	As needed
basis?	
If under contract, what is the bed day	\$625
rate paid to the contracted facility?	
If not under contract, does the	N/A
LMHA/LBHA use facility for single-case	
agreements for as needed beds?	
If not under contract, what is the bed	N/A
day rate paid to the facility for single-	
case agreements?	

Name of Facility	Grace Greco Maxwell Mental Health Unit @ Dell Children's Hospital
Location (city and county)	Austin Texas / Travis County
Phone number	(512) 324-0000
Key admission criteria	Children, Adolescents and Adults with psychiatric symptoms/ suicidal ideation
Service area limitations, if any	None
Other relevant admission information	BTCS approval for funding is required prior to coordination of admission.
for first responders	
Number of Beds	24
Is the facility currently under contract	Yes
with the LMHA/LBHA to purchase	
beds?	
If under contract, is the facility	Private Psychiatric Beds
contracted for rapid crisis stabilization	
beds (funded under the Psychiatric	
Emergency Service Center contract or	
Mental Health Grant for Justice-	
Involved Individuals), private	
psychiatric beds, or community mental	
health hospital beds (include all that	
apply)?	A 1 1
If under contract, are beds purchased as	As needed
a guaranteed set or on an as needed basis?	
	\$625
If under contract, what is the bed day rate paid to the contracted facility?	\$UZ5
If not under contract, does the	N/A
LMHA/LBHA use facility for single-case	
agreements for as needed beds?	
If not under contract, what is the bed	N/A
day rate paid to the facility for single-	
case agreements?	
case agreements	

Name of Facility	Shoal Creek Hospital
Location (city and county)	Austin Texas / Travis County
Phone number	(512) 324-2000
Key admission criteria	Children, Adolescents and Adults with psychiatric symptoms/ suicidal ideation
Service area limitations, if any	None
Other relevant admission information	BTCS approval for funding is required prior to coordination of admission.
for first responders	
Number of Beds	94
Is the facility currently under contract	Yes
with the LMHA/LBHA to purchase	
beds?	
If under contract, is the facility	Private Psychiatric Beds
contracted for rapid crisis stabilization	
beds (funded under the Psychiatric	
Emergency Service Center contract or	
Mental Health Grant for Justice-	
Involved Individuals), private	
psychiatric beds, or community mental	
health hospital beds (include all that	
apply)? If under contract, are beds purchased as	As needed
a guaranteed set or on an as needed	As needed
basis?	
If under contract, what is the bed day	\$625
rate paid to the contracted facility?	4020
If not under contract, does the	N/A
LMHA/LBHA use facility for single-case	
agreements for as needed beds?	
If not under contract, what is the bed	N/A
day rate paid to the facility for single-	
case agreements?	

Name of Facility	Austin Oaks Hospital
Location (city and county)	Austin Texas / Travis County
Phone number	(512) 440-4800
Key admission criteria	Adolescents and Adults with psychiatric symptoms/ suicidal ideation
Service area limitations, if any	None
Other relevant admission information	BTCS approval for funding is required prior to coordination of admission.
for first responders	
Number of Beds	80
Is the facility currently under contract	No
with the LMHA/LBHA to purchase	
beds?	
If under contract, is the facility	N/A
contracted for rapid crisis stabilization	
beds (funded under the Psychiatric	
Emergency Service Center contract or	
Mental Health Grant for Justice-	
Involved Individuals), private psychiatric beds, or community mental	
health hospital beds (include all that	
apply)?	
If under contract, are beds purchased as	N/A
a guaranteed set or on an as needed	
basis?	
If under contract, what is the bed day	N/A
rate paid to the contracted facility?	
If not under contract, does the	Yes
LMHA/LBHA use facility for single-case	
agreements for as needed beds?	
If not under contract, what is the bed	\$625
day rate paid to the facility for single-	
case agreements?	

II.C Plan for local, short-term management of pre- and post-arrest individuals who are deemed incompetent to stand trial

What local inpatient or outpatient alternatives to the state hospital does the local service area currently have for competency restoration? If not applicable, enter N/A.

Identify and briefly describe available alternatives.

- Our Jail Diversion Coordinators and Felony Mental Health Docket Care Coordinator are able to divert individuals out of jail and into community-based behavioral health services to stabilize persons in the community. This includes admission into our Outpatient Competency Restoration program when a person qualifies.
- Local magistrates and/or judges work closely with our Jail Diversion Staff in all eight (8) counties to coordinate care in the community versus in a jail setting.
- We often admit to our Crisis Respite Units to ensure 24/7 monitoring and treatment until a person is ready to go home. Jail diversion staff report to the courts on the individual's progress in treatment. Staff advocate for dismissal or reduction in charges as appropriate.

What barriers or issues limit access or utilization to local inpatient or outpatient alternatives?

- Felony charges continue to be difficult to move from a forensic setting to the community setting for treatment priority.
- Jail Diversion staff are able to access one of two Crisis Respite Units and the Diversion Center to ensure a thorough evaluation prior to movement into the community. Ongoing judicial involvement is critical as we proceed with treatment in the community.
- A new Williamson County Jail-Based Competency Restoration Program (JBCR) just approved for implementation in FY23 will aid in restoring competency more quickly when Outpatient Competency Restoration is not an option. More JBCR program funding is needed to begin programs in other counties to reduce the wait for state hospital-based competency restoration.

Does the LMHA or LBHA have a dedicated jail liaison position? If so, what is the role of the jail liaison and at what point is the jail liaison engaged?

• We have 6 FTEs assigned to Jail Diversion Services. We have established excellent relationships in local county jails and provide screenings and evaluations for the courts.

- BTCS also has 1 FTE with Jail Diversion experience assigned to Austin State Hospital and San Antonio State Hospital to assess and transition individuals on forensic commitment back into the courts and community.
- Jail Diversion Staff advocate and recommend release for individuals in order to prioritize community-based treatment alternatives according to Article 16.22 of the Texas Criminal Code.
- Our Jail Liaison and Diversion Coordinators can be reached at <u>Jail@bbtrails.org</u>. The Director of Forensic Services, Jonathan Lemuel, can be reached directly at 512-826-5234.

If the LMHA or LBHA does not have a dedicated jail liaison, identify the title(s) of employees who operate as a liaison between the LMHA or LBHA and the jail.

NA

What plans, if any, are being developed over the next two years to maximize access and utilization of local alternatives for competency restoration?

- BTCS received its first Outpatient Competency Restoration Contract in FY2021 and is working with area courts to serve individuals court-ordered to participate.
- BTCS also recommends appropriate outpatient alternatives for other individuals who have not been deemed
 incompetent to stand trial. Our excellent relationship with the local courts and dedication to partnerships in
 the community has made our jail diversion program successful although our forensic commitments continue
 to increase.
- BTCS will launch its first Jail-Based Competency Restoration Program in FY23 in collaboration with Williamson County Jail.

Does the community have a need for new alternatives for competency restoration? If so, what kind of program would be suitable (i.e., Outpatient Competency Restoration Program inpatient competency restoration, Jail-based Competency Restoration, etc.)?

• BTCS supports the expansion of Jail-Based Competency Restoration programs and we have had regular conversations with our community partners on how to proceed when funding is secured.

What is needed for implementation? Include resources and barriers that must be resolved.

 Funding is our only barrier to implementation; most of our jail partners have identified space and expressed interest.

II.D Seamless Integration of emergent psychiatric, substance use, and physical healthcare treatment and the development of Certified Community Behavioral Health Clinics (CCBHCs)

- 1. What steps have been taken to integrate emergency psychiatric, substance use, and physical healthcare services? Who did the LMHA/LBHA collaborate with in these efforts?
 - Bluebonnet Trails Community Services is a Certified Community Behavioral Health Clinic. We provide integrated substance use and psychiatric care at all BTCS locations. This includes intensive outpatient substance use services and Co-Occurring Psychiatric and Substance Use Disorder Case Management.
 - We partner with a Federally Qualified Health Center, Community Health Centers of South Central Texas
 (CHCSCT), who provides physical health care on our campuses in Seguin, Bastrop, Bastrop ISD, Elgin ISD,
 Lockhart and Gonzales. We partner with Texas A&M College of Nursing through a HRSA grant to provide
 physical health care in Georgetown, Cedar Park, Taylor, and Giddings. BTCS also employs physical health
 providers in La Grange and at Jarrell ISD. Dental is also offered at some locations.
- 2. What are the plans for the next two years to further coordinate and integrate these services?
 - We plan to find a partner to co-locate physical healthcare services in Burnet County. We also seek to sustain our integrated healthcare model, which was started through the 1115 Medicaid Transformation Waiver.

II.E Communication Plans

- 1. What steps have been taken to ensure key information from the Psychiatric Emergency Plan is shared with emergency responders and other community stakeholders?
 - BTCS attends monthly and quarterly Behavioral Health Task Force Meetings and communicates with leaders in our communities on an ongoing basis. We have comprehensive pamphlets and brochures for our programs, and our website includes all the exciting new services provided at BTCS facilities around our service sites (www.bbtrails.org).
- 2. How will the LMHA or LBHA ensure staff (including MCOT, hotline, and staff receiving incoming telephone calls) have the information and training to implement the plan?

- We provide Quarterly Trainings to our MCOT Team and regularly communicate changes and updates to our hotline and appointment line. Information regarding crisis services is also communicated during quarterly Executive Management Team meetings.
- We are able to review all changes or concerns in our weekly Directors meeting attended by all area directors in charge of the local crisis service system. We also host a monthly Crisis Workgroup meeting with all crisis supervisors.

II.F Gaps in the Local Crisis Response System

What are the critical gaps in the local crisis emergency response system? Consider needs in all parts of the local service area, including those specific to certain counties.

Counties	Service System Gaps	Recommendations to Address the Gaps
All	 There are still gaps for those needing substance use detoxification. Emergency rooms are regularly utilized for regaining sobriety as well. This can lead to unnecessary public intoxication charges and jail. Respite and EOU services have transformed our crisis system of care. However, we often stretch these resources to serve a higher intensity of need than these units will allow. 	 Local Residential Detoxification funding Medication Assisted Treatment Funding A greater network of long-term residential treatment options which can be accessed with state dollars. Allow PPB and PESC dollars to be used for persons whose primary or only diagnosis is a substance use disorder. Additional PPB and EOU funds within our service area would offer more options for substance use stabilization.

Counties	Service System Gaps	Recommendations to Address the Gaps
Caldwell and Gonzales Counties	 These rural counties do not have designated Mental Health Deputies. Having a mental health deputy program working in conjunction with the LMHA has been proven to be very effective. 	 Continue allowing SB292 to support Mental Health Deputy projects Expand funding for MH Deputies.

Section III: Plans and Priorities for System Development

III.A Jail Diversion

The Sequential Intercept Model (SIM) informs community-based responses to the involvement of individuals with mental and substance use disorders in the criminal justice system. The model is most effective when used as a community strategic planning tool to assess available resources, determine gaps in services, and plan for community change.

A link to the SIM can be accessed here:

https://www.prainc.com/wp-content/uploads/2017/08/SIM-Brochure-Redesign0824.pdf

In the tables below, indicate the strategies used in each intercept to divert individuals from the criminal justice system and indicate the counties in the service area where the strategies are applicable. List current activities and any plans for the next two years.

Intercept 0: Community Services Current Programs and Initiatives:	County(s)	Plans for upcoming two years:
Mental Health Deputy Project	Bastrop, Burnet, Fayette, & Guadalupe	Continue operating project through SB292 funding

MCOT Crisis Intervention Services	Bastrop, Burnet, Caldwell, Fayette, Gonzales, Guadalupe, Lee & Williamson	Continue working with Law Enforcement during Crisis Intervention to divert arrest
 Collaborative meeting with all Law Enforcement in Williamson County as a result of a SIM Exercise in 2018, promoting jail diversion. 	• Williamson	Continue monthly meetings. Carry out updated objectives established in a March 2022 follow-up SIM Workshop, informing the future of the Diversion Center and Youth Therapeutic Respite Program.

Intercept 1: Law Enforcement Current Programs and Initiatives:	County(s)	Plans for upcoming two years:
 Forensic Assertive Community Treatment (FACT) 	Guadalupe, Burnet	• Continue operating FACT through SB292 and reserve funding.
 Law Enforcement and Community Education on Mental Health, Substance Use, Intellectual and Developmental Disabilities and Autism 	• All counties	• Continue
Sequential Intercept Mapping	WilliamsonCaldwellGuadalupe	SIM workshops completed in September 2021 and March 2022; continue workgroup with Law Enforcement
 Active CIT officers in 6 of our 8 counties 	Bastrop, Burnet, Fayette, Lee, Guadalupe and Williamson	Continue partnership and MH Deputy Project through SB292
Co-location of MH Deputies at our clinics	Bastrop, Fayette, Lee and Burnet Counties	Continue partnerships
 Jail Diversion, Licensed Training staff and Crisis Staff provide mental health training for jails and local law enforcement officers 	• All	Continue providing training

Intercept 2: Post Arrest; Initial Detention and Initial Hearings Current Programs and Initiatives:	County(s)	Plans for upcoming two years:
• Our team of six Jail Diversion Coordinators conducts mental health assessments upon receiving 16.22 orders or when notified by TLETS that a person with prior IDD or MH services has been arrested. The team makes dismiss and transfer recommendations when appropriate, and/or coordinates psychiatric services when needed, to include medications, substance use screenings, substance use counseling, and IDD assessments. The team also makes referrals for the Outpatient Competency Restoration Program and specialty courts and dockets when appropriate.	• All	 Continue current programming Add Jail-Based Competency Restoration as a referral source in Williamson County. BTCS received funding through a CCBHC-IA Grant to hire a specialized Jail Diversion Coordinator in December 2022 to serve individuals in jail with an intellectual or developmental disability with the goal of expediting access to placement outside the jail setting. This position is grant-funded for 4 years.

Intercept 3: Jails/Courts	County(s)	
Current Programs and Initiatives:		Plans for upcoming two years:
Jail Diversion Program works with court system to provide mental health assessments and recommendations	• All	 Continue programming Establish a formal Jail-Based Competency Restoration Program in Williamson County by May or June 2023.
Transformative Justice Program	Williamson	Continue partnership

Misdemeanor and Felony Mental Health Docket	• Williamson	 Continue to have FACT and SUD programs work with these dockets Continue providing Care Coordination for FMHD participants through a CCBHC-Expansion Grant Support a new Jail-Based Competency Restoration Program in Williamson County
• Veterans Court	Williamson and Guadalupe	 Continue to have SUD and Veterans teamwork with these courts BTCS has also just been awarded a VA Grant that will enable us to provide targeted case management for persons participating in these courts
 We are engaged with our local county jails to ensure medication is prescribed or continued while in the jail setting. We are the contracted psychiatric provider at all county jails except Williamson where they contract with a private provider. 	Bastrop, Burnet, Fayette, Guadalupe, Lee	Continue contracting to provide psychiatric services
• Jail Diversion staff work closely with Kerrville State Hospital to transition individuals who have been found NGRI. Court approval is required to move individuals from an inpatient setting into community-based services. The Crisis Respite Unit is used to transition individuals who have been institutionalized or have	• All	Continue collaboration

 been hospitalized for years back into the community BTCS provides COPSD services and links inmates with outpatient services after release. This includes SUD IOP treatment or referrals to residential, individual and group counseling, and case management services 	• Caldwell	Continue providing services
• Once a person is sent to a State Hospital for competency restoration, BTCS has ongoing liaison services to ensure a smooth transition back into the courts or community while charges are being reviewed. Our Crisis Respite Units and State Hospital Step-Down Homes are used as a step-down from state hospitals into ongoing mental health services. Jail Diversion staff continue to work with the courts for a disposition on a forensic case.	• All	Continue partnership

Intercept 4: Reentry	County(s)	
Current Programs and Initiatives:		Plans for upcoming two years:
•Jail Diversion – FACT Reentry Planning	Williamson and Guadalupe	• Continue
•State Mental Health Hospital Re-Entry	• All	• Continue
Coordination and Planning		
 BTCS is actively engaged in the 	• All	Continue efforts, including
transition from judicial system into		Outpatient Competency Restoration
ongoing mental health care in the		
community		

Jail Diversion staff are actively engaged with the Kerrville State Hospital and have successfully transitioned individuals back into the community	•	All	• Continue
•Jail Diversion staff and ASH Liaison work with the forensic unit and judicial system to transition individuals while still under the supervision of the courts. Our relationship with the courts has helped to expand this diversion initiative.	•	All	• Continue
• The TCOOMMI Mental Health Diversion Program Initiative includes a designated staff member who develops a service plan and coordinates transitions from jail into the community as part of the Jail Diversion Team. Coordination of discharge and transition planning ensures continuity of care and is a primary function of this specialized team.	•	All	• Continue

Intercept 5: Community Corrections Current Programs and Initiatives:	County(s)	Plans for upcoming two years:
Texas Correctional Office on Offenders with Medial or Mental Impairments (TCOOMMI) Program	• All	• Continue
TCOOMMI Continuity of Care Program	• All	• Continue

Transitional Case Management, Parole and CSCD	• All	• Continue
Psychiatric Prescriber	• All	• Continue
FACT Intensive Case Management	Guadalupe, Burnet and Williamson	• Continue
TCOOMMI Program Director acts as liaison to community corrections and works in conjunction with Bluebonnet's Jail Diversion Team, Community Liaison and Training Division to provide a wide-range of behavioral health trainings to community corrections and community support programs. Examples of trainings include: Mental Health Awareness Training at Texas Department of Criminal Justice Parole Division & Probation; Police/Law Enforcement & Victim Services, along with community support agencies and organizations.	• All	• Continue
The TCOOMMI Director and staff work closely with CSCD/Probation and Parole Supervisors and staff to provide on-going education and training during staff meetings, community events, and on an individualized basis	• All	• Continue
Bluebonnet has multiple TCOOMMI Programs throughout the eight	• All	• Continue

counties including Continuity of Care, Transitional Case Management, Intensive Case Management, and Mental Health Initiative Jail Diversion. All staff in these programs are responsible for facilitating access to comprehensive services and liaising with community corrections. Monthly interdisciplinary treatment team meetings are part of the TCOOMMI Program and include thorough review of participants' engagement, compliance to treatment recommendations, and options to reinforce positive behaviors and effectively address barriers to treatment.		
Bluebonnet's FACT Program pairs individuals in Bluebonnet's mental health services who have risk factors for criminal justice system involvement with a specially trained case manager who has training and education in criminogenic risk factors and behavioral health treatment.	Guadalupe, Burnet and Williamson	Continue through SB292 funding and reserve funds

III.B Other Behavioral Health Strategic Priorities

The <u>Texas Statewide Behavioral Health Strategic Plan</u> identifies other significant gaps and goals in the state's behavioral health services system. The gaps identified in the plan are:

- Gap 1: Access to appropriate behavioral health services for special populations (e.g., individuals with co-occurring psychiatric and substance use services, individuals who are frequent users of emergency room and inpatient services)
- Gap 2: Behavioral health needs of public school students
- Gap 3: Coordination across state agencies
- Gap 4: Veteran and military service member supports
- Gap 5: Continuity of care for individuals exiting county and local jails
- Gap 6: Access to timely treatment services
- Gap 7: Implementation of evidence-based practices
- Gap 8: Use of peer services
- Gap 9: Behavioral health services for individuals with intellectual disabilities
- Gap 10: Consumer transportation and access
- Gap 11: Prevention and early intervention services
- Gap 12: Access to housing
- Gap 13: Behavioral health workforce shortage
- Gap 14: Services for special populations (e.g., youth transitioning into adult service systems)
- Gap 15: Shared and usable data

The goals identified in the plan are:

- Goal 1: Program and Service Coordination Promote and support behavioral health program and service coordination to ensure continuity of services and access points across state agencies.
- Goal 2: Program and Service Delivery Ensure optimal program and service delivery to maximize resources in order to effectively meet the diverse needs of people and communities.
- Goal 3: Prevention and Early Intervention Services Maximize behavioral health prevention and early intervention services across state agencies.
- Goal 4: Financial Alignment Ensure that the financial alignment of behavioral health funding best meets the needs across Texas.
- Goal 5: Statewide Data Collaboration Compare statewide data across state agencies on results and effectiveness.

In the table below briefly describe the current status of each area of focus as identified in the plan (key accomplishments, challenges and current activities), and then summarize objectives and activities planned for the next two years.

Area of Focus	Related Gaps and Goals from Strategic Plan	Current Status	Plans
Improving access to timely outpatient services	• Gap 6 • Goal 2	 Centralized Appointment Line Psychiatric Hospital Discharge appointments scheduled through Appointment Line within 3 days. We average less than 10 days from initial call to first appointment. MCOT actively works to transition individuals from an inpatient setting into the community and ongoing services. We continue to add SUD IOP services and Counseling in rural school districts 	 Continue to foster relationships with schools to offer early intervention to young people; BTCS has just been awarded a CCBHC-Improvement and Advancement Grant to support this work Continuous Quality Improvement to increase training initiatives and competencies among our COC and Crisis Teams. Provide SUD and MH services via televideo beyond COVID-19 Make additional primary care services available via televideo

Area of Focus	Related Gaps and Goals from Strategic Plan	Current Status	Plans
		 Provide SUD and MH services via televideo during COVID-19 	
Improving continuity of care between inpatient care and community services and reducing hospital readmissions	• Gap 1 • Goals 1,2,4	 With the crisis units in Guadalupe and Williamson Counties, we have been able to bring down our state hospital bed usage to under 50% of our allocation. Diversion Center, Respite and Continuity of Care positions actively participate in planning throughout a person's stay to ensure wraparound services upon discharge 	 Focus on strategies with MCOs and Psychiatric Hospitals to know when a person is discharging from a private hospital to our service area. Continue to evaluate Hospital Transition Pilot Programs started with HHSC on 9/1/2020. Continue to recruit and train EOU RNs, LPHAs and MH Techs on best practices to provide rapid stabilization and re-integration into the community. Retain quality technicians
Transitioning long- term state hospital patients who no longer need an inpatient level of care to the community	• Gap 14 • Goals 1,4	We currently utilize jail diversion staff to review and consider transition services for long term clients at Kerrville State Hospital.	 Continue to promote community-based services with long term state hospital individuals. Continue to evaluate Hospital Transition Pilot

Area of Focus	Related Gaps and Goals from Strategic Plan	Current Status	Plans
and reducing other state hospital utilization		Our ASH and SASH Continuity of Care staff member works closely with inpatient staff to find alternatives to continued hospitalization.	Programs started with HHSC on 9/1/2020. • Support local providers who elect to contract with the HCBS-AMH Program
		 We meet regularly with State Hospital staff and Courts (if forensic) to develop comprehensive transition plans. 	
Implementing and ensuring fidelity with evidence-based practices	• Gap 7 • Goal 2	 We moved the training department under Human Resources and added more training staff. We have Train the Trainers within our 	 We have hired a Health Equity Specialist to conduct internal audits of EBPs Continue to send HR Trainers to Train the
		organization for a variety of Evidence Based Practices (EBPs). • We participate on HHSC	Trainer opportunities.
		 We participate on mise Technical Assistance calls We require online and inperson training for staff, including refresher trainings. 	

Area of Focus	Related Gaps and Goals from Strategic Plan	Current Status	Plans
		We utilize Relias which is an e-Learning system, allowing us to make more training available to our staff, with Continuing Education Credits.	
Transition to a recovery-oriented system of care, including use of peer support services	• Gap 8 • Goals 2,3	 Person-Centered care is an agency wide priority and peer services are actively working with persons and utilizing WRAP curriculum. We have a Recovery and Resiliency module to NEO for all employees Participate in Williamson County Recovery Community Initiative Participate in the Resilient Bastrop County Initiative and Resilient Wilco Initiative All persons receiving mental healthcare at BTCS develop a Person- 	 Continue to develop Peer providers from within our organization and hire peers for all service areas. BTCS has been awarded a VA Grant to fund 3 new Veteran Peer positions. Continue to infuse our leadership with knowledge of recovery.

Area of Focus	Related Gaps and Goals from Strategic Plan	Current Status	Plans
		Centered Recovery Plan to guide care. • All direct care staff are Trauma-Informed Care Course Level 1 Certified, with the opportunity to become Level 3 Certified	
Addressing the needs of consumers with co-occurring substance use disorders	• Gaps 1,14 • Goals 1,2	 We provide COPSD, SUD IOP and OSAR services. We expanded COPSD and SUD IOP programming with additional funding awarded in FY22. We utilize Seeking Safety curriculum. We offer Medication Assisted Treatment for alcohol, opioids and tobacco, led by an Addiction Psychiatrist throughout all of our counties as a result of a CCBHC-Expansion Grant. We have an LCDC on our MCOT Team in Guadalupe County. 	 Apply for additional SUD treatment funding when available for Detox. Encourage and expand the use of LCDCs on MCOT, ACT and other specialty teams. Increase partnerships through OSAR across 30 counties. BTCS was awarded a School-Based Health Center (SBHC) Opioid Misuse Prevention Game Project Grant to provide early education to students at Independent School Districts using an innovative video game

Area of Focus	Related Gaps and Goals from Strategic Plan	Current Status	Plans
			developed at the Yale Center for Health and Learning Games BTCS was recently awarded a CCBHC- Improvement and Advancement (CCBHC-IA) Grant to add a Specialized Care Coordinator for persons with co-occurring MH/SUD
Integrating behavioral health and primary care services and meeting physical healthcare needs of consumers.	• Gap 1 • Goals 1,2	 BTCS actively operates 12 integrated behavioral health and primary care clinics in Bastrop, Caldwell, Fayette, Gonzales, Guadalupe, Lee and Williamson Counties. Three of these clinics are school-based: Elgin, Bastrop and Jarrell. We partner to provide dental services at some of these locations, which is supported by a Promoting 	 Continue collaboration with Texas A&M School of Nursing to promote a bachelors, masters and doctorate nurse pipeline in rural communities. Continue achieving metrics for the PIP-BHC grant in partnership with FQHC, Community Health Centers of South Central Texas Continue HRSA Grant project and partnership with Texas A&M.

Area of Focus	Related Gaps and Goals from Strategic Plan	Current Status	Plans
		Integrated Primary and Behavioral Health Care (PIP-BHC) grant.	 Maintain Rural Health Clinic certification in La Grange. Pursue Rural Health Clinic (RHC) certification in Giddings. BTCS was just awarded a School-Based Health Center (SBHC) Opioid Misuse Prevention Game Project Grant to provide early education to students at Independent School Districts using an innovative video game developed at the Yale Center for Health and Learning Games.
Consumer transportation and access to treatment in remote areas	• Gap 10 • Goal 2	 BTCS has applied for and received grants to provide transportation BTCS executed a contract in late FY2022 with Starlight Transportation to deliver transportation in all of our service areas We provide televideo services to all BTCS locations. 	 Continue to consider opportunities with Ride Share companies who seek to expand into rural counties Continue to utilize televideo platforms (Zoom, Microsoft Teams, and Lifesize) for individuals to participate in intakes, counseling and psychiatry appointments from home beyond COVID-

Area of Focus	Related Gaps and Goals from Strategic Plan	Current Status	Plans
Addressing the	• Gap 14	Leadership from	19 to overcome transportation barriersContinue pilot with HHSC to
behavioral health needs of consumers with Intellectual Disabilities	• Gap 14 • Goals 2,4	 Behavioral Health and IDD collaboratively work together, hosting biweekly calls. We include IDD professionals on our FACT and ACT Teams. Our crisis units serve persons with co-occurring MH/IDD We regularly consult with in-house BCBAs from our Autism Program. We have a BCBA on our Crisis Team in Williamson County We access our IDD Crisis Team for consult on behavioral plans in our Crisis Units. We have three integrated Respite Units for MH, IDD and co-occurring MH/IDD. Our units in Georgetown 	improve Outpatient Mental Health Services for Persons with Intellectual & Developmental Disabilities (OBI Program). BTCS will hire a Specialized Jail Diversion Clinician to serve persons in jail with IDDs, funded through a newly awarded CCBHC-IA Grant.

Area of Focus	Related Gaps and Goals from Strategic Plan	Current Status	Plans
		 and Round Rock can access primary care remotely, while unit in Seguin can access primary care within walking distance on the same campus. We have an integrated Diversion Center Program serving persons with cooccurring MH/IDD. Through House Bill 13 grant funding, we improved mobility and safety for individuals with IDD on our Respite Unit in Georgetown. 	
Addressing the behavioral health needs of veterans	• Gap 4 • Goals 2,3	 We provide Military Veteran Peer Network services and operate a Veterans Counseling Program in all 8 counties. We provide Eye Movement Desensitization and Reprocessing (EMDR) 	 Continue operating these programs, expanding outreach. Through a newly awarded VA Grant, BTCS will expand outreach, suicide risk screening, case management, financial support, equine assisted therapy and more

Area of Focus	Related Gaps and Goals from Strategic Plan	Current Status	Plans
		 therapy for trauma recovery. We provide Military Cultural Awareness training in the community We collaborate with and participate on local Veterans Treatment Courts 	for Veterans in Guadalupe and Williamson Counties. This includes dedicated services to persons served by our Veterans Treatment Courts.

III.C Local Priorities and Plans

- Based on identification of unmet needs, stakeholder input, and internal assessment, identify the top local priorities for the next two years. These might include changes in the array of services, allocation of resources, implementation of new strategies or initiatives, service enhancements, quality improvements, etc.
- List at least one but no more than five priorities.
- For each priority, briefly describe current activities and achievements and summarize plans for the next two years. If local priorities are addressed in the table above, list the local priority and enter "see above" in the remaining two cells.

Local Priority	Current Status	Plans
Provision of care aligned with Certified Community Behavioral Health Clinic	Updating policies and procedures to reflect integration of programs and services.	 Launch a Patient Portal through our electronic health record. A newly hired Health Equity Specialist is
(CCBHC) Model		conducting a Comprehensive Needs

Local Priority	Current Status	Plans
	 Providing holistic, trauma-informed, person and family-centered services. Expanding use of Screening, Brief Intervention and Referral for Treatment (SBIRT). Establishing changes to clinical workflows and staffing patterns in order to implement standardized screenings and interventions based on national standards. An Addiction Psychiatrist informs our Medication Assisted Treatment programming. Care Coordinators are infused throughout our system to support transitions in care and communication among internal and external providers. 	Assessment to identify health disparities and gaps in care, informing our agencywide strategic plan. • Achieve recertification when current CCBHC certification expires in April 2023. • Continue to pursue CCBHC-related grants through the Substance Abuse and Mental Health Services Administration (SAMHSA). • Expand utilization of evidence-based practices. • Set and achieve internal targets for 9 national CCBHC measures.
Implementation of Community-Based Stabilization Alternatives that meet behavioral health needs	 We currently operate 26 adult Respite beds, 16 youth therapeutic respite beds, and 10 adult diversion beds in Williamson and Guadalupe Counties. BTCS holds Private Psychiatric Bed contracts with 7 local private hospitals at a highly discounted rate to serve persons without insurance. BTCS was awarded a contract through a competitive bid process in 	 Continue to seek funding opportunities to expand community-based psychiatric stabilization. Open a third State Hospital Step-Down Home.

Local Priority	Current Status	Plans
	 2022 to open a second Youth Therapeutic Respite Center in Guadalupe County. BTCS operates two State Hospital Step-Down Homes to receive persons directly from inpatient care. Training has been provided to crisis staff to improve competency in serving individuals with substance use needs and intellectual and developmental disabilities. 	
Integrated physical and behavioral health services	 See above BTCS achieved Rural Health Clinic (RHC) status for our La Grange location in 2022. 	 Sustain Behavioral Health Consultant positions. Achieve RHC status in Giddings. Establish new healthcare partnerships with organizations committed to holistic care. Participate in efforts to improve communication among healthcare providers through care coordination efforts.
Implement models supporting recovery of individuals with behavioral health needs	 See above Certified Peer Specialists and Family Partners serve in State Hospital Step- Down Programs and crisis units. In FY21, BTCS trained 414 persons in Mental Health First Aid, 970 persons in Trauma-Informed Care and 194 	 Expand access to Certified Peer Specialists, Veteran Peers, Family Partners, Peer Recovery Coaches and Peer-to-Peer for First Responders Continue to coordinate training for staff, school personnel and community members for the early identification and

Local Priority	Current Status	Plans
	persons in Skills for Psychological Recovery.	intervention of behavioral health symptoms
		Expand the availability of substance use peer services in acute crisis settings.

III.D System Development and Identification of New Priorities

Development of the local plans should include a process to identify local priorities and needs and the resources required for implementation. The priorities should reflect the input of key stakeholders involved in development of the Psychiatric Emergency Plan as well as the broader community. This builds on the ongoing communication and collaboration LMHAs and LBHAs have with local stakeholders. The primary purpose is to support local planning, collaboration, and resource development. The information provides a clear picture of needs across the state and support planning at the state level.

In the table below, identify the local service area's priorities for use of any *new* funding should it become available in the future. Do not include planned services and projects that have an identified source of funding. Consider regional needs and potential use of robust transportation and alternatives to hospital care. Examples of alternatives to hospital care include residential facilities for non-restorable individuals, outpatient commitments, and other individuals needing long-term care, including geriatric patients with mental health needs. Also consider services needed to improve community tenure and avoid hospitalization.

Provide as much detail as practical for long-term planning and:

- Assign a priority level of 1, 2 or, 3 to each item, with 1 being the highest priority;
- Identify the general need;
- Describe how the resources would be used—what items/components would be funded, including estimated quantity when applicable; and
- Estimate the funding needed, listing the key components and costs (for recurring/ongoing costs, such as staffing, state the annual cost.

Priority	Need	Brief description of how resources would be used	Estimated Cost
1	Private Psychiatric Bed funds	BTCS currently receives reimbursement from HHSC for an average of 5.3 private psychiatric hospital beds per day. However, the need for uninsured persons in crisis is significantly greater in our area and state hospital beds are not accessible. In FY21, BTCS purchased an average of 17.47 beds per day. When CARES Act dollars are no longer available to offset most of this cost, we will be unable to financially absorb this need.	Approximately \$2,776,281
2	Ongoing Jail-Based Competency Restoration Funding	BTCS would utilize resources to fund supplies and clinical positions (Psychiatrist, Forensic Psychologist, Program Manager, Peer Specialist, RN, Competency Restoration Educator, and Re-Entry Specialist) at the Williamson County Jail to perform competency-restoration services for persons on a 46B Commitment who are ineligible for OCR and waiting for a state hospital bed. If more funding was available, BTCS would consider establishing a multi-county JBCR Program to serve our rural counties.	Approximately \$812,232/year for a single program or \$1,500,000 for multiple programs
3	Substance Use Detoxification	BTCS would utilize resources to implement residential detoxification services.	Approximately \$1,165,052

Appendix A: Levels of Crisis Care

Admission criteria – Admission into services is determined by the individual's level of care as determined by the TRR Assessment found here for adults or here for children and adolescents. The TRR assessment tool is comprised of several modules used in the behavioral health system to support care planning and level of care decision making. High scores on the TRR Assessment module, such as items of Risk Behavior (Suicide Risk and Danger to Others) or Life Domain Functioning and Behavior Health Needs (Cognition), trigger a score that indicates the need for crisis services.

Crisis Hotline – The Crisis Hotline is a 24/7 telephone service that provides information, support, referrals, screening and intervention. The hotline serves as the first point of contact for mental health crisis in the community, providing confidential telephone triage to determine the immediate level of need and to mobilize emergency services if necessary. The hotline facilitates referrals to 911, MCOT, or other crisis services.

Crisis Residential Units– provide community-based residential crisis treatment to individuals with a moderate to mild risk of harm to self or others, who may have fairly severe functional impairment, and whose symptoms cannot be stabilized in a less intensive setting. Crisis residential facilities are not authorized to accept individuals on involuntary status.

Crisis Respite Units –provide community-based residential crisis treatment for individuals who have low risk of harm to self or others, and who may have some functional impairment. Services may occur over a brief period of time, such as two hours, and generally serve individuals with housing challenges or assist caretakers who need short-term housing or supervision for the persons they care for to avoid mental health crisis. Crisis respite facilities are not authorized to accept individuals on involuntary status.

Crisis Services – Crisis services are brief interventions provided in the community that ameliorate the crisis and prevent utilization of more intensive services such as hospitalization. The desired outcome is resolution of the crisis and avoidance of intensive and restrictive intervention or relapse.

Crisis Stabilization Units (CSU) – are the only licensed facilities on the crisis continuum and may accept individuals on emergency detention or orders of protective custody. CSUs offer the most intensive

mental health services on the crisis facility continuum by providing short-term crisis treatment to reduce acute symptoms of mental illness in individuals with a high to moderate risk of harm to self or others.

Extended Observation Units (EOU) – provide up to 48-hours of emergency services to individuals in mental health crisis who may pose a high to moderate risk of harm to self or others. EOUs may accept individuals on emergency detention.

Mobile Crisis Outreach Team (MCOT) – MCOTs are clinically staffed mobile treatment teams that provide 24/7, prompt face-to-face crisis assessment, crisis intervention services, crisis follow-up, and relapse prevention services for individuals in the community.

Psychiatric Emergency Service Center (PESC) – PESCs provide immediate access to assessment, triage and a continuum of stabilizing treatment for individuals with behavioral health crisis. PESC projects include rapid crisis stabilization beds within a licensed hospital, extended observation units, crisis stabilization units, psychiatric emergency service centers, crisis residential, and crisis respite and are staffed by medical personnel and mental health professionals that provide care 24/7. PESCs may be co-located within a licensed hospital or CSU or be within proximity to a licensed hospital. The array of projects available in a service area is based on the local needs and characteristics of the community and is dependent upon LMHA/LBHA funding.

Rapid Crisis Stabilization and Private Psychiatric Beds – Hospital services staffed with medical and nursing professionals who provide 24/7 professional monitoring, supervision, and assistance in an environment designed to provide safety and security during acute behavioral health crisis. Staff provides intensive interventions designed to relieve acute symptomatology and restore the individual's ability to function in a less restrictive setting.

Appendix B: Acronyms

CSU	Crisis Stabilization Unit	
EOU	Extended Observation Units	
HHSC	Health and Human Services Commission	
LMHA	Local Mental Health Authority	
LBHA	Local Behavioral Health Authority	
MCOT	Mobile Crisis Outreach Team	
PESC	Psychiatric Emergency Service Center	