

Form O: Consolidated Local Service Plan

The Texas Health and Human Services (HHSC) requires all local mental health authorities (LMHA) and local behavioral health authorities (LBHA) submit the Consolidated Local Service Plan (CLSP) for fiscal year 2025 by **December 31**, **2024** to Performance.Contracts@hhs.texas.gov and CrisisServices@hhs.texas.gov.

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.

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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
- Crisis residential or respite unit, or both
- Diversion centers
- Contracted inpatient beds
- Services for co-occurring disorders
- Substance use prevention, intervention, and treatment
- Integrated healthcare: mental and physical health
- Services for people with Intellectual or Developmental Disorders (IDD)
- Services for veterans
- Other (please specify)

Table 1: Mental Health Services and Sites

Operator (LMHA, LBHA, contractor or sub-contractor)	Street Address, City, and Zip	Phone Number	County	Type of Facility	Services and Target Populations Served
Specialty Health		806-766- 0310	Lubbock	Administrative/ Outpatient	 Other: Administration, Finance, Human Resources, Contracts Management, Quality Management, Compliance and Utilization Management Services for individuals with Intellectual Developmental Disorders

Operator (LMHA, LBHA, contractor or sub-contractor)	Street Address, City, and Zip	Phone Number	County	Type of Facility	Services and Target Populations Served
StarCare Specialty		806-740- 1421	Lubbock	Outpatient	 Consumer Rights Risk Management Veterans Services Texas Department of Criminal Justice (TDCJ) Counseling Services for individuals with Intellectual Developmental Disorders (IDD) Adult and Children's Behavioral Health Services Texas Correctional Office on Offenders with Medical or Mental Impairments (TCOOMMI) Services Youth Empowerment Services (YES) Waiver Certified Community Behavioral Health Clinic (CCBHC) Substance use disorder treatment (Outpatient)
StarCare Specialty Health System – Outreach and Recovery Center		806-740- 1421	Lubbock		Peer-Led Outreach and Recovery Center (ORC)
StarCare Specialty Health System – Sunrise Canyon Hospital (SRCH)		806-740- 1421	Lubbock	Outpatient Clinic/Inpatient Hospital, EOU	 Screening, Assessment, and Intake Extended Observation Unit (23-hour hold) Services for Co-Occurring disorders Substance use disorder treatment (MAT) 30-bed inpatient psychiatric hospital Adult and Children and Adolescents Mental Health Clinic Outreach, Screening, Assessment, and Referral for Substance Use Disorders (SUD)

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 in Chapter 531, Texas Government Code, Section 531.0993 to reduce recidivism rates, arrests, and incarceration among people with mental illness, as well as reduce the wait time for people on forensic commitments. The 2024-25 Texas General Appropriations Act, House Bill 1, 88th Legislature, Regular Session, 2023, (Article II, HHSC, Rider 48) appropriated additional state funding to expand the grant and implement new programs. The Rural Mental Health Initiative Grant Program, authorized by Texas Government Code, Section 531.09936, awarded additional state funding to rural serving entities to address the mental health needs of rural Texas residents. These grants support community programs by providing behavioral health care services to people 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 people with mental illness involved in the criminal justice system.

In the table below, describe projects funded under the Mental Health Grant Program for Justice-Involved Individuals, Senate Bill 1677, and Rider 48. Number served per year should reflect reports for the previous fiscal year. If the project is not a facility; indicate N/A in the applicable column below. Add additional rows if needed. If the LMHA or LBHA does not receive funding for these projects, indicate N/A and proceed to I.C.

Table 2: Mental Health Grant for Justice-Involved Individuals Projects

Fiscal Year	Project Title (include brief description)	County(s)	Type of Facility	Population Served	Number Served per Year
25	S.B. 292: Jail Based Competency Restoration (JBCR): JBCR provides treatment to individuals with either misdemeanor or felony offenses that qualify for this treatment setting under conditions set by Article 46B.070 of the Texas Code of Criminal Procedure and 26 Texas Administrative Code, Part 1, Chapter 307, Subchapter C. Program staff is comprised of a multidisciplinary team including: forensic educator, forensic case managers, forensic psychologist, psychiatrist, physician's assistant. Treatment includes a combination of individual session and group sessions to provide forensic education, case management sessions, weekly treatment team meetings and evaluations to assess progress in treatment, and meetings with attorneys. Program staff coordinate with the courts and attend mental health docket two to three times per month. Staff also works with LCDC officers to monitor individuals' needs while incarcerated. The program has served 214 clients total with 35 clients served in fiscal year 2024.	Lubbock	County	Inmates with misdemeanor or felony offenses incarcerated at the Lubbock County Detention Center	40

I.C Community Mental Health Grant Program: Projects related to jail diversion, justice-involved individuals, and mental health deputies

Section 531.0999, Texas Government Code, requires HHSC to establish the Community Mental Health Grant Program, a grant program to support communities providing and coordinating mental health treatment and services with transition or supportive services for people 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, or recovery services, and assist with people transitioning between or remaining in mental health treatment, services and supports.

In the table below, describe Community Mental Health Grant Program projects related to jail diversion, justice-involved individuals, and mental health deputies. Number served per year should reflect reports for the previous fiscal year. Add additional rows if needed. If the LMHA or LBHA does not receive funding for these projects, indicate N/A and proceed to I.D.

Table 3: Community Mental Health Grant Program Jail Diversion Projects

Fiscal Year	Project Title (include brief description)	County(s)	Population Served	Number Served per Year
2025	StarCare CMHG – Rural Jail in Reach StarCare's CMHG project aims to address unmet needs and support a continuum of care in Hockley County. Partnering with local authorities, the project seeks to increase access to behavioral health services and improve care coordination for underserved populations and justice-involved individuals.	,	Justice Involved Individuals	Unknown

I.D Community Participation in Planning Activities

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

Table 4: Community Stakeholders

	Stakeholder Type		Stakeholder Type
\boxtimes	People receiving services	\boxtimes	Family members
\boxtimes	Advocates (children and adult)	\boxtimes	Concerned citizens or others

	Stakeholder Type		Stakeholder Type
	Local psychiatric hospital staff (list the psychiatric hospital and staff that participated): • Northwest Texas Healthcare System dba The Pavilion • Oceans Behavioral Health of Abilene • Oceans Behavioral health of Permian Basin • Shannon Behavioral Health • Oceans Lubbock • Red River		State hospital staff (list the hospital and staff that participated): •
\boxtimes	Mental health service providers	\boxtimes	Substance use treatment providers
\boxtimes	Prevention services providers	\boxtimes	Outreach, Screening, Assessment and Referral Centers
	County officials (list the county and the name and official title of participants): Cochran County Sheriff, Scott Protho Hockley County Sheriff, Ray Scifres Lubbock County Sheriff, Kelly Rowe Lubbock County Court at Law #2, Judge Tom W. Brummett		City officials (list the city and the name and official title of participants): • City of Lubbock, Mayor Mark McBrayer

	Stakeholder Type		Stakeholder Tyne
	Stakeholder Type Federally Qualified Health Center and other primary care providers		Stakeholder Type LMHA LBHA staff *List the LMHA or LBHA staff that participated: Betty Hardwick Bluebonnet Trails Border Region Burke Center Camino Real Center for Life Resources Central Plains Coastal Plains Community Healthcare Concho Valley Denton County Gulf Bend Center Heart of Texas Helen Farabee Centers Hill Country Mental Health Integral Care Pecan Valley PermiaCare
			 Termideare Texas Panhandle Texoma Community Centers Tri-county Services Tropical Texas
\boxtimes	Hospital emergency room personnel		Emergency responders
\boxtimes	Faith-based organizations		Local health and social service providers
\boxtimes	Probation department representatives	\boxtimes	Parole department representatives

	Stakeholder Type		Stakeholder Type	
	Court representatives, e.g., judges, district attorneys, public defenders (list the county and the name and official title of participants): • Hockley County Court, Judge Sharla Baldridge • Lubbock County Court at Law #2, Judge Tom W. Brummett • Lubbock Mental Health Dockt, Judge Curtis Parrish		Law enforcement (list the county or city and the name and official title of participants): City of Lubbock Police Department, Chief Seth Herman, CIT Team, Ethan Noble Cochran County Sheriff, Sheriff Scott Protho Crosby County Sheriff, Ethan Villanueva Hockley County Sheriff, Sheriff Ray Scifres Lubbock County Detention Center, Chief Ryan Braus Lubbock County Sheriff, Sheriff Kelly Rowe Lynn County Sheriff, Sheriff Kelly Rowe Community Resource Coordination Group (CRCG) – StarCare staff	
\boxtimes	Education representatives	\boxtimes	Employers or business leaders	
\boxtimes	Planning and Network Advisory Committee	\boxtimes	Local peer-led organizations	
\boxtimes	Peer specialists	\boxtimes	IDD Providers	
\boxtimes	Foster care or child placing agencies	\boxtimes	Community Resource Coordination Groups	
	Veterans' organizations		Housing authorities	

Stakeholder Type	Stakeholder Type
Local health departments	 Community Health Center of Lubbock - Community Needs Assessment Texas Tech University Health Sciences Center - West Texas Mental Health Collaborative StarCare's CEO, Beth Lawson, serves on the following committees/boards: Chamber of Commerce: Chair of Board of Directors, Government Relations Committee West Texas Mental Health Collaborative: Founding Member

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.

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Planning and Network Advisory Committee (PNAC) input.

Participation in All Texas Access.

Key partner in the creation of the West Texas Mental Health Collaborative

Participation in the 2023 Lubbock Area Comprehensive Mental Health Needs Assessment conducted by the Meadows Mental Health Policy Institute.

Participation in the 2024 Community Needs Assessment conducted by the Community Health Center of Lubbock.

Participation in the Lubbock Department of Public Health Committee Needs Assessment 2024

Participation in the 2019 Needs Assessment done by the West Texas Mental Health Collaborative

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

Significant barriers include stigma, financial sustainability, and transportation issues that exist for families most in need who often live in rural areas and/or far away from service providers.

A shortage of psychiatrists.

A fragmented service response system that treats physical health and mental health separately.

A need for expanded inpatient capacity for psychiatric illnesses located in a setting where complex, comorbid conditions can be assessed and treated.

A need for increased integration and coordination of services, especially for individuals in crisis and veterans.

A need for a targeted expansion of community care capacity to divert people from hospitalization and jail bookings.

A need for specialty behavioral health care for children with more intensive needs as well as a need for local inpatient care for youth.

The loss of funding represented by the Medicaid 1115 waiver program.

A need for more counselors and psychologists in Lubbock and surrounding areas

A need for community education about available resources

An increase in detox beds

A need for mental health education for parents

An increase in collaboration with schools and mental health providers

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 and emergency departments;
- Judiciary, including mental health and probate courts;
- Prosecutors and public defenders;
- Other crisis service providers (to include neighboring LMHAs and LBHAs);
- People accessing crisis services and their family members; and
- 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 Developing 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;
 - ▶ StarCare's Local Planning and Network Development (LPND) Plan involves input from the Planning and Network Advisory Committee (PNAC) and StarCare's Board of Trustees.

- ▶ StarCare's Policies and Procedures (P&Ps), including Crisis Services P&Ps, include input from StarCare's Board of Trustees.
- ▶ StarCare's Risk Management Director, Debie Martin, participates in the Regional Medical Operations Center (RMOC).
- Ensuring the entire service area was represented; and
 - ▶ StarCare conducted an analysis of local courts that are civilly and forensically committing individuals to the state hospital. The analysis determined that the majority of civil and forensic commitments originate from Lubbock County.
 - ▶ StarCare participates as a community partner in four specialty courts in Lubbock County. These courts include Drug Court, DWI Court, Family Court, and the Mental Health Docket. A representative from StarCare is invited to attend each session of Family Court and Mental Health Court. The DWI and Drug Courts have hired a county employee to attend the court and complete the assessments. A referral to OSAR may be needed, but not included in the court.

Soliciting input.

- ▶ StarCare worked in collaboration with lawyers, law enforcement, and judges to develop a mental health docket in the Lubbock area with the goal of more quickly identifying individuals being arrested who may receive or be in need of mental health services. This reduces crisis situations from occurring which sometimes result in hospitalizations.
- Lubbock County established a Local Private Defenders Office (LPDO) to assist with the legal representation of indigent defendants with severe and persistent mental illness. Through a contractual relationship with StarCare, individuals being booked are screened for eligibility for mental health and substance use services. This program works in conjunction with the Mental Health Docket to help divert individuals with severe and persistent mental illness from incarceration. StarCare's court liaisons ensure that the courts are aware of the least restrictive, clinically appropriate services available for each individual. These services include the full array of mental health services provided under the Department of State Health Services Mental Health Performance Contract, as well as other services available through additional contracts and community resources.

StarCare's Risk Management Director participates in the Regional Operation Center (RMOC) to build a regional plan to develop emergency plans for an array of scenarios including psychiatric emergencies. Through the RMOC, StarCare's staff are able to participate in drills to study the effectiveness of the emergency plans.

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

- 1. How is the Crisis Hotline staffed?
 - a. During business hours
 - StarCare contracts with AVAIL Solutions, Inc. for crisis hotline services. AVAIL services are available 24 hours a day, 365 days a year.
 - b. After business hours
 - StarCare contracts with AVAIL Solutions, Inc. for crisis hotline services. AVAIL services are available 24 hours a day, 365 days a year.
 - c. Weekends and holidays
 - StarCare contracts with AVAIL Solutions, Inc. for crisis hotline services. AVAIL services are available 24 hours a day, 365 days a year.
- 2. Does the LMHA or LBHA have a sub-contractor to provide the Crisis Hotline services? If, yes, list the contractor.
 - Yes, AVAIL Solutions, Inc., 3310 E. 5th Street, Tyler, Texas 75701
- 3. How is the MCOT staffed?
 - a. During business hours
 - There are three (3) MCOT workers available 7 days a week from 8:00 am
 8:00 pm, one (1) MCOT worker available 7 days a week from 2:00pm-2:00am, and two (2) MCOT workers available 7 days a week from 8:00 pm 8:00 am.
 - b. After business hours
 - There are three (3) MCOT workers available 7 days a week from 8:00 am 8:00 pm, one (1) MCOT worker available 7 days a week from 2:00pm-2:00am, and two (2) MCOT workers available 7 days a week from 8:00 pm 8:00 am.
 - c. Weekends and holidays
 - There are three (3) MCOT workers available 7 days a week from 8:00 am 8:00 pm, one (1) MCOT worker available 7 days a week from 2:00pm-2:00am, and two (2) MCOT workers available 7 days a week from 8:00 pm 8:00 am.

- 4. Does the LMHA or LBHA have a sub-contractor to provide MCOT services? If yes, list the contractor.
 - No
- 5. Provide information on the type of follow up MCOT provides (phone calls, face-to-face visits, case management, skills training, etc.).
 - MCOT provides follow-up via phone calls, face-to-face visits, case management, and skills training.
- 6. Do emergency room staff and law enforcement routinely contact the LMHA or LBHA when a person in crisis is identified? If so, please describe MCOT's role for:
 - a. Emergency Rooms:
 - MCOT does deploy to local rural emergency rooms; University Medical Center (UMC) employs their own assessors and Covenant Medical Center, Covenant Children's Hospital, and Covenant Levelland contract with StarCare MCOT to provide assessment on clients, if needed. MCOT facilitates transfers to Sunrise Canyon Hospital from the two main hospitals in Lubbock. MCOT also provides assessments and referrals for local rural emergency rooms, as needed.
 - b. Law Enforcement:
 - Local law enforcement contacts MCOT when they determine a need for an assessment. MCOT responds when requested by law enforcement and provides appropriate assessments and referrals.
 - Through the Lubbock Police Department Community Intervention Team (CIT), a MCOT worker (LCCIT) accompanies Lubbock Police Department officers on crisis calls within Lubbock County Monday through Thursday 1:00pm-11:00pm.
 - Through the Rural Crisis Response and Diversion (RCRD) grant through HHSC, StarCare has been able to co-locate a crisis worker within the Hockley County Sheriff's Office. This crisis worker accompanies the Sheriff's Office and the Levelland Police Department on calls when on shift.
- 7. What is the process for MCOT to respond to screening requests at state hospitals, specifically for walk-ins?
 - N/A
- 8. What steps should emergency rooms and law enforcement take when an inpatient level of care is needed?
 - a. During business hours:
 - ERs and law enforcement contact MCOT when they have determined that an individual requires an inpatient level of care. MCOT then facilitates the

steps required for hospitalization. MCOT is available 24 hours a day, 7 days a week.

b. After business hours:

 ERs and law enforcement contact MCOT when they have determined that an individual requires an inpatient level of care. MCOT then facilitates the steps required for hospitalization. MCOT is available 24 hours a day, 7 days a week.

c. Weekends and holidays:

ERs and law enforcement contact MCOT when they have determined that an individual requires an inpatient level of care. MCOT then facilitates the steps required for hospitalization. MCOT is available 24 hours a day, 7 days a week.

- 9. What is the procedure if a person cannot be stabilized at the site of the crisis and needs further assessment or crisis stabilization in a facility setting?
 - If a client needs facility-based crisis stabilization, he or she can be transported to Sunrise Canyon for an evaluation to determine if admission to the Extended Observation Unit (EOU) or Inpatient Hospitalization is needed, and all appropriate paperwork will be completed.
- 10.Describe the community's process if a person requires further evaluation, medical clearance, or both.

An individual can be placed in the Extended Observation Unit (EOU) on a voluntary basis or admitted to the SRCH inpatient unit if more intensive treatment is needed. Basic medical clearance can be completed at SRC prior to admission, but if a person is in need of medical clearance, MCOT will arrange for transportation to the UMC ER. An individual can be seen by a doctor for admission to the EOU, 24-hours a day, 7-days a week as the EOU employs telemedicine doctors 24 hours a day.

- 11. Describe the process if a person needs admission to a psychiatric hospital.
 - After an assessment is completed and it has been determined that an
 individual requires admission to SRCH, MCOT authorizes a bed at the
 hospital and consults with the doctor to determine if there is a need for
 medical clearance. If medical clearance is needed, then MCOT will arrange
 for transportation to the UMC ER via Lubbock Aid ambulance. MCOT will
 first see if a bed is available and appropriate at SRCH. If not, MCOT will
 make arrangements with one of the private psychiatric hospitals in out
 network.
- 12.Describe the process if a person needs facility-based crisis stabilization (i.e., other than psychiatric hospitalization and may include crisis respite, crisis residential, extended observation, or crisis stabilization unit).
 - If a client needs facility-based crisis stabilization, he or she can be transported to Sunrise Canyon for an evaluation to determine if admission

to the Extended Observation Unit (EOU) or Inpatient Hospitalization is needed, and all appropriate paperwork will be completed.

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.

StarCare's MCOT is a clinically staffed mobile treatment team that can provide prompt face-to-face crisis assessment, crisis intervention, crisis follow-up and relapse prevention services for individuals in the community. These services are designed to reach individuals where they are—home, school or other community locations, 24 hours per day, 365 days per year. MCOT can also provide face-to-face virtual assessments.

- 14.If an inpatient bed at a psychiatric hospital is not available, where does the person wait for a bed?
 - StarCare operates its own 30-bed inpatient psychiatric hospital, Sunrise Canyon Hospital (SRCH), but also contracts with six hospitals that can be utilized should SRCH have no beds available. If a bed cannot be obtained at one of these contracted hospitals, while waiting for an inpatient bed, StarCare will utilize its Extended Observation Unit (EOU), which allows StarCare to monitor the individual for up to 23-hours on a voluntary basis. StarCare will also contact non-contracted hospitals when no other options are available in order to ensure the individual receives care.
- 15. Who is responsible for providing ongoing crisis intervention services until the crisis is resolved or the person is placed in a clinically appropriate environment at the LMHA or LBHA?
 - MCOT is responsible for providing continued crisis intervention services.
- 16. Who is responsible for transportation in cases not involving emergency detention for adults?
 - MCOT workers are responsible for providing transportation or arranging for transportation via one of our contracted providers including Lubbock Aid Ambulance, Tac Med, City Ambulance, Uber Health, and Sendaride in cases not involving emergency detention.
- 17. Who is responsible for transportation in cases not involving emergency detention for children?
 - MCOT workers are responsible for providing transportation or arranging for transportation via one of our contracted providers including Lubbock Aid Ambulance, Tac Med, City Ambulance, Uber Health, and Sendaride in cases not involving emergency detention.

Crisis Stabilization

Use the table below to identify the alternatives the local service area has for facility-based crisis stabilization services (excluding inpatient services). Answer each element of the table below. Indicate "N/A" if the LMHA or LBHA does not have any facility-based crisis stabilization services. Replicate the table below for each alternative.

Table 5: Facility-based Crisis Stabilization Services

Name of facility	Sunrise Canyon 23-Hour Extended Observation Unit (EOU)
Location (city and county)	Lubbock/Lubbock County
Phone number	806-740-1400
Type of facility (see Appendix A)	Extended Observation Unit (EOU) – Emergency services of up to 23-hours provided to individuals in psychiatric crisis, in a secure and protected, clinically staffed, psychiatrically supervised environment with immediate access to urgent or emergent medical and psychiatric evaluation and treatment.
Key admission criteria	Patients may pose a moderate to high risk of harm to themselves or others. The EOU accepts individuals on voluntary status. The EOU is co-located within Sunrise Canyon Hospital, a 30-bed licensed inpatient hospital.
Circumstances under which medical clearance is required before admission	Individuals identified with medical conditions which are not within the scope of care available in the psychiatric services provided in the EOU or inpatient care settings which might indicate the individual is at risk due to the medical conditions (i.e., substance detox, diabetes or hypertension untreated, seizure disorder, etc.)
Service area limitations, if any	The EOU serves the five-county catchment area of Cochran, Crosby, Hockley, Lubbock, and Lynn counties.
Other relevant admission information for first responders	Initial first responder assessment to identify initial service need that discerns between medical, psychiatric, substance abuse, and risk of harm to self or others.
Does the facility accept emergency detentions?	Yes
Number of beds	The EOU currently utilizes four chairs.
HHSC funding allocation	None. The EOU is funded through a grant from the Substance Abuse and Mental Health Services Administration (SAMHSA)

Inpatient Care

Use the table below to identify the alternatives to the state hospital the local service area has for psychiatric inpatient care for uninsured or underinsured people. Answer each element of the table below. Indicate "N/A" if an element does not apply to the alternative provided. Replicate the table below for each alternative.

Table 6: Psychiatric Inpatient Care for Uninsured or Underinsured

Name of facility	Sunrise Canyon Hospital
Location (city and county)	Lubbock/Lubbock County
Phone number	(806) 740-1400
Key admission criteria	Individuals are assessed through MCOT and must meet criteria for admission according to the mental health laws cited in the Texas Administrative Code.
	Sunrise Canyon Hospital serves the five-county catchment area of Cochran, Crosby, Hockley, Lubbock, and Lynn counties.
Other relevant admission information for first responders	Conveying to first responders that all individuals admitted into inpatient care should be facilitated through the MCOT crisis assessment processes.
Number of beds	Currently SRCH has 30 beds; however, expansion to 60 beds is underway and expected to be complete in early calendar year 2026.
Is the facility currently under contract with the LMHA or LBHA to purchase beds?	N/A
If under contract, is the facility contracted for contracted psychiatric beds (funded under the Community-Based Crisis Programs contract or Mental Health Grant for Justice-Involved Individuals), private psychiatric beds, or community mental health hospital beds (include all that apply)?	N/A

Name of facility	Sunrise Canyon Hospital
If under contract, are beds purchased as a guaranteed set or on an as needed basis?	N/A
If under contract, what is the bed day rate paid to the contracted facility?	N/A
If not under contract, does the LMHA or 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	Northwest Texas Healthcare System (Pavilion)
Location (city and county)	Amarillo / Potter County
Phone number	(806) 354-1810
Key admission criteria	Individuals are assessed through MCOT and must meet criteria for admission according to the mental health laws cited in the Texas Administrative Code.
Service area limitations, if any	Serves Potter County and the surrounding rural counties.
Other relevant admission information for first responders	Conveying to first responders that all individuals admitted into inpatient care should be facilitated through the MCOT crisis assessment processes.
Number of Beds	90
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?	\$952.75
If not under contract, does the LMHA/LBHA use the facility for single-case agreements 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	Oceans Behavioral Health of Abilene
Location (city and county)	Abilene / Taylor and Jones Counties
Phone number	(325) 691-0030
Key admission criteria	Individuals are assessed through MCOT and must meet criteria for admission according to the mental health laws cited in the Texas Administrative Code.

Service area limitations, if any	Serves Taylor and Jones Counties and the surrounding rural counties.
Other relevant admission information for first responders	Conveying to first responders that all individuals admitted into inpatient care should be facilitated through the MCOT crisis assessment processes.
Number of Beds	90
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?	\$725
If not under contract, does the LMHA/LBHA use the facility for single-case	N/A

agreements as-needed beds?	
If not under contract, what is the bed-day rate paid to the facility for single-case agreements?	N/A

Name of Facility	Oceans Behavioral Hospital Lubbock
Location (city and county)	Lubbock / Lubbock County
Phone number	(806) 516-1190
Key admission criteria	Individuals are assessed through MCOT and must meet criteria for admission according to the mental health laws cited in the Texas Administrative Code.
Service area limitations, if any	Serves Lubbock and Lubbock county and the surrounding rural counties.
Other relevant admission information for first responders	Conveying to first responders that all individuals admitted into inpatient care should be facilitated through the MCOT crisis assessment processes.
Number of Beds	32
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?	\$725
If not under contract, does the LMHA/LBHA use the facility for single-case agreements 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	Oceans Rehavioral Hespital of Permian Rasin
Location (city and county)	Oceans Behavioral Hospital of Permian Basin Midland / Midland County
Phone number	(432) 561-5915
Key admission criteria	Individuals are assessed through MCOT and must meet criteria for admission according to the mental health laws cited in the Texas Administrative Code.
Service area limitations, if any	Serves Midland and Ector Counties and the surrounding rural counties.
Other relevant admission information for first responders	Conveying to first responders that all individuals admitted into inpatient care should be facilitated through the MCOT crisis assessment processes.
Number of Beds	62
Is the facility currently under contract with the LMHA/LBHA to purchase beds?	Yes

Private psychiatric beds
As needed
\$725
N/A

Name of Facility	Red River
Location (city and county)	Wichita Falls, Texas
Phone number	(940) 000-0733
Key admission criteria	Individuals are assessed through MCOT and must meet criteria for admission according to the mental health laws cited in the Texas Administrative Code.

Service area limitations, if any	Serves Wichita County and the surrounding rural counties.	
Other relevant admission information for first responders	Conveying to first responders that all individuals admitted into inpatient care should be facilitated through the MCOT crisis assessment processes.	
Number of Beds	22	
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?	\$700	
If not under contract, does the LMHA/LBHA use the facility for single-case agreements 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	Shannon Behavioral Health	
Location (city and county)	San Angelo / Tom Green County	
Phone number	(325) 949-5722	
Key admission criteria	Individuals are assessed through MCOT and must meet criteria for admission according to the mental health laws cited in the Texas Administrative Code.	
Service area limitations, if any	Serves Tom Green County and the surrounding rural counties.	
Other relevant admission information for first responders	Conveying to first responders that all individuals admitted into inpatient care should be facilitated through the MCOT crisis assessment processes.	
Number of Beds	80	
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?	\$825.03
If not under contract, does the LMHA/LBHA use the facility for single-case agreements 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

II.C Plan for Local, Short-term Management for People Deemed Incompetent to Stand Trial Preand Post-arrest

- 1. Identify local inpatient or outpatient alternatives, if any, to the state hospital the local service area has for competency restoration? Indicate "N/A" if the LMHA or LBHA does not have any available alternatives.
 - In the five-county catchment area served by StarCare, the local inpatient alternative to the state hospital is StarCare's 30-bed inpatient psychiatric hospital, Sunrise Canyon Hospital. The local outpatient alternative is StarCare's 23-hour Extended Observation Unit.
- 2. What barriers or issues limit access or utilization to local inpatient or outpatient alternatives?

•	N/A
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- 3. 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? Identify the name(s) and title(s) of employees who operate as the jail liaison.
 - StarCare is embedded as the mental health provider in the Lubbock County Detention Center through an agreement for services. StarCare provides the following services: Continuity of Care, Men's Special Needs Pod, Women's Special Needs Pod, case management, 24/7 screening and suicide prevention team, psychiatric care (3 prescribers, 1 MD, and 2 LVNs), and administrative oversite.
 - In the past year, StarCare has added a Continuity of Care Liaison to the StarCare and Lubbock County Detention Center contract for mental health services. The CoC position is responsible for coordination between the StarCare restoration program and the LIDDA. Additional coordination is facilitated by the Director of Forensic Mental Health and the Assistant Director of Forensic Mental Health- Jail Services.
- 4. 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.

N/A

- 5. What plans, if any, are being developed over the next two years to maximize access and utilization of local alternatives for competency restoration?
 - StarCare, as the local mental health authority (LMHA), continues to coordinate routinely through a mental health docket process with court judges and attorneys (defense and prosecution) to initiate and coordinate the stabilization, education, and continuity of care needs of individuals determined to be incompetent but restorable as a result of psychological examination. Competency restoration services are currently rendered in the community and jail-based setting. Competency restoration and jail contract program staff collaborate in a mental health docket setting that meets routinely to communicate and coordinate the flow of individuals determined to be in need of these services. Current established notification processes, initiated through the court liaison for the county, will continue to expedite the initiation of care immediately once an individual is identified by court order to be in need of restoration services. In effort to streamline these processes even more, those on the clearing house waitlist as well as MSU waitlist are placed onto specific

caseloads (through the StarCare and LSO contract for mental health services in the Lubbock County Detention Center) for pre and post treatment to ensure that medications are established, monitored, and that continuity of care is provided. We have also hired a Continuity care Liaison that assists with the administrative portion of making sure these individuals transition smoothly in and out of the JBCR program. Efforts are made to conduct services in the least restrictive environment possible within the allowances granted by the courts.

- 6. Does the community have a need for new alternatives for competency restoration? If so, what kind of program would be suitable (e.g., Outpatient Competency Restoration, Inpatient Competency Restoration, Jail-based Competency Restoration, FACT Team, Post Jail Programs)?
 - Because StarCare is able to offer both outpatient competency restoration and jail-based competency restoration, the community currently has no need for other competency restoration alternatives.
- 7. What is needed for implementation? Include resources and barriers that must be resolved.
 - N/A

II.D Seamless Integration of Emergent Psychiatric, Substance Use, and Physical Health Care Treatment and the Development of Texas Certified Community Behavioral Health Clinics

- 1. What steps have been taken to integrate emergency psychiatric, substance use, and physical healthcare services? Who did the LMHA or LBHA collaborate with in these efforts?
 - StarCare has taken many steps to integrate emergent psychiatric, substance use, and physical healthcare treatment. StarCare operates a 23-hour Extended Observation Unit which is available to anyone in the community who feels they are experiencing a psychiatric crisis. These individuals include ones who are receiving follow-up services after a crisis situation. All of these treatment options are available at StarCare's Sunrise Canyon facility which also houses StarCare's "front door" services which provide screening for access to services including those for substance use disorders, an Opioid Treatment Clinic, and Sunrise Canyon Hospital, a 30-bed inpatient psychiatric hospital. Additionally, StarCare is a Certified Behavioral Health Clinic (CCBHC) providing care coordination services and mental and primary physical health

care. StarCare provides physical medical services through the CCBHC-IA grant.

- 2. What are the plans for the next two years to further coordinate and integrate these services?
 - Over the course of the next two years, StarCare plans to further coordinate and integrate emergent psychiatric, substance use, and physical healthcare treatment by working to expand services that have already been implemented in order to support additional people in need.

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?
 - StarCare shares key information from the Psychiatric Emergency Plan with emergency responders, court officials, law enforcement entities, , emergency rooms, hospitals, and other community stakeholders through the use of informational meetings, social media, collaboration through the mental health docket, local news media, and community volunteerism.
- 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?
 - All StarCare staff have access to information and training through New Employee Orientation and yearly annual refresher training, StarCare's utilizes the intranet, internal emails, and the monthly newsletter, as well as appropriate staff available to answer questions and provide additional training via phone or face-to-face. Additionally, StarCare utilizes Mystery Callers to ensure the appropriate information is being communicated to consumers, as well as to make certain that practices and protocols are being followed. StarCare also utilizes HHSC online training opportunities as they become available.

II.F Gaps in the Local Crisis Response System

Use the table below to identify 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. Add additional rows if needed.

Table 7: Crisis Emergency Response Service System Gaps

		•
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. County	Service System Gaps	Recommendations to Address the Gaps
Cochran	 Cochran County is a rural area and therefore, access to care is a challenge Transportation barriers Shortage of mental health professionals 	Partnership with Spartan Transportation – transportation for consumers in outlying counties As a founding partner of the West Texas Mental Health Collaborative, developing a plan to address the shortage of mental health professionals in the area.
Crosby	 Crosby County is a rural area and therefore, access to care is a challenge Transportation barriers Shortage of mental health professionals 	 Partnership with Spartan Transportation – transportation for consumers in outlying counties. As a founding partner of the West Texas Mental Health Collaborative, developing a plan to address the shortage of mental health professionals in the area.

Lubbock	 Hockey County is a rural area and therefore, access to care is a challenge Transportation barriers Shortage of mental health professionals While the city of Lubbock is urban, the majority of Lubbock County is rural and access to care is a challenge Transportation barriers 	 Partnership with Spartan Transportation – transportation for consumers in outlying counties. As a founding partner of the West Texas Mental Health Collaborative, developing a plan to address the shortage of mental health professionals in the area. Implemented an agreement to provide tele-psych services at Hockley County jail. Through the Rural Crisis Response and Diversion (RCRD) program, StarCare has partnered with the Hockley County Sheriff's Office to develop a Co-Responder program to divert individuals experiencing a behavioral health crisis from arrest or incarceration to receive the appropriate level of care. Through a new Community Mental Health Grant, StarCare is working with Hockley County to implement a JBCR program. StarCare also provides in- house jail crisis evaluations. Partnership with Spartan Transportation – transportation for consumers in outlying counties As a founding partner of the West Texas Mental Health Collaborative, developing a plan to address the shortage of mental health professionals in the area. Our new diversion center hopes to reduce the number of persons in crisis sent to jail and/or emergency rooms. Sunrise Canyon Hospital is increasing from 45 beds to 60. Fifteen beds will be forensic beds.
Lynn	 Lynn County is a rural area and therefore, access to care is a challenge Transportation barriers Shortage of mental health professionals 	 Partnership with Spartan Transportation – transportation for consumers in outlying counties As a founding partner of the West Texas Mental Health Collaborative, developing a plan to address the shortage of mental health professionals in the area.

Section III: Plans and Priorities for System Development

III.A Jail Diversion

The Sequential Intercept Model (SIM) informs community-based responses to people with mental health and substance disorders involved 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 people 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. Enter N/A if not applicable.

Table 8: Intercept 0 Community Services

Table 6. Intercept o community Services		
Intercept 0: Community Services Current Programs and Initiatives:	County(s)	Plans for upcoming two years:
Mobile Crisis Outreach Team (MCOT)	Cochran, Crosby, Hockley, Lubbock, and Lynn	StarCare's MCOT team will continue to work with LEO to provide diversion options for individuals experiencing a psychiatric emergency.
AVAIL Crisis Hotline	Cochran, Crosby, Hockley, Lubbock, and Lynn	Avail Crisis Line provides 24/7 crisis hotline services to the catchment area, connecting individuals needing crisis services to the appropriate resource based on their current needs.
Extended Observation Unit (EOU) and expanded crisis services	 Cochran, Crosby, Hockley, Lubbock, and Lynn 	Work toward sustainability.
Rural Crisis Response and Diversion (RCRD)	Hockley	Work toward sustainability and to be able to replicate

		the program in Cochran, Crosby, and Lynn counties.
The HOPE Center for Health and Wellbeing	Cochran, Crosby, Hockley, Lubbock, and Lynn	Build a physical location wherein crisis services will be offered to people experiencing mental health distress. 24/7 services will include psychiatric crisis intervention, law enforcement/emergency medical drop-off, on-site security, and a 23-hour Extended Observation Unit (EOU). StarCare plans to add other services such as on-site medical clearance, intensive outpatient services, Medicaid/Social Security benefit applications, and identification restoration.

Table 9: Intercept 1 Law Enforcement

Table 9. Intercept I Law Emorcement			
Intercept 1: Law Enforcement Current Programs and Initiatives:	County(s)	Plans for upcoming two years:	
Co-mobilization with Mental Health Deputies	• Lubbock	StarCare's plans for the upcoming two years include continuing to provide high-quality care and services to the people in need in StarCare's catchment area. StarCare also plans to continue to develop, build, and strengthen relationships with county jails, law enforcement agencies, and courts.	
Co-location with the Lubbock Police Department's Crisis Intervention Team (CIT) and/or MH Deputies	• Lubbock	 Lubbock Police Department (LPD) is the recipient of a Category 2 Grant to develop co-response 	

•	Rural Crisis Response and Diversion/Co-Responder Program	•	Hockley	•	teams between LMHAs and LPD for people experiencing a psychiatric emergency. Work toward sustainability and to be able to replicate the program in Cochran, Crosby, and Lynn counties.
•	Training law enforcement staff	•	Cochran, Crosby, Hockley, Lubbock, Lynn	•	Diversion Programs Director provides monthly training to law enforcement officers within the 5-county catchment area. Primary focus is how to navigate diversion services.
•	Documenting police contacts with persons with mental illness	•	Lubbock	•	Diversion Programs Director maintains contact with LPD CIT team about police contacts with persons with mental illness.
•	Police-friendly drop-off point	•	Cochran, Crosby, Hockley, Lubbock, Lynn	•	StarCare offers a 24- hour drop-off and walk- in services for crisis at its Sunrise Canyon location. The HOPE Center for Health and Wellbeing will provide 24/7 law enforcement/ emergency medical drop-off.
•	Service linkage and follow-up for individuals who are not hospitalized	•	Cochran, Crosby, Hockley, Lubbock, Lynn	•	MCOT provides 7 day follow-up and linkage to all individuals discharged within the 5-county catchment who are discharged from an inpatient psych facility.

Table 10: Intercept 2 Post Arrest

Intercept 2: Post Arrest; Initial Detention and Initial Hearings Current Programs and Initiatives:	County(s)	Plans for Upcoming Two Years:
N/A		

Intercept 2: Post Arrest; Initial		
Detention and Initial Hearings		Plans for Upcoming Two
Current Programs and Initiatives:	County(s)	Years:

Table 11: Intercept 3 Jails and Courts

Intercent 2:				
Intercept 3: Jails/Courts Current Programs and Initiatives:	County(s)	Plans for upcoming two years:		
Routine screening for mental illness and diversion eligibility	Cochran, Crosby, Hockley, Lubbock, Lynn	Continue efforts to expand identification of individuals in need of restoration and jail diversion related to mental health, competency restoration, and intellectual disability service needs which are already in place.		
Mental Health Court Docket	• Lubbock	Seek ongoing funding resource to increase the availability to pharmacological resource needs to individuals identified as indigent with compromised ability to provide services without assistance.		
Drug Court Docket	• Lubbock	To continue efforts to communicate to the legislature and DSHS the local need and concern for individuals identified as incompetent to proceed with legal processes and reinitiate jail-based competency restoration services in the jail setting upon removal of current legislative barriers to provide these services.		
Outpatient Competency Restoration	Cochran, Crosby, Hockley, Lubbock, Lynn	 Outpatient Competency Restoration (OCR) began in Texas in2007 in response to an ongoing shortage of state hospital beds and a growing number of individuals in the criminal and juvenile justice systems with serious and persistent mental illness and emotional disturbances in need of competency restoration. Located in the Outpatient Clinic at the Sunrise Canyon Complex in Lubbock, TX, program staff is comprised of a multidisciplinary team including 2 education specialists, forensic psychologist, and psychiatrist. Treatment includes a combination of individual 		

		sessions and group sessions to provide forensic education and case management services, medication management appointments to assess the need for psychotropic medication and monitor accordingly, and meetings with the defense attorney. • The program staff coordinate with the courts and attend mental health docket that is held two to three times a month. OCR provides treatment to individuals who may have either a misdemeanor or felony offenses that qualify for outpatient treatment according to Article 46B.0711 and Article 46B.072 of the Texas Code of Criminal Procedure.
Providing services in jail for persons Incompetent to Stand Trial	Lubbock Hockley	 StarCare's Jail-Based Competency Restoration (JBCR) program provides competency restoration services for persons identified as Incompetent to stand trial. The Mental Health Services for Lubbock County Detention Center contract provides all the pre and post- restoration mental health care for individuals on the clearinghouse & MSU waitlists on top of mental health care for the rest of the facility. This contract provides a dedicated prescriber, case manager, .5 FTE of the Continuity of Care Liaison, and administrative oversight. This team also identifies and monitors the potential need for court- ordered medications and the administration of the medication.
Compelled medication in jail for persons Incompetent to Stand Trial	LubbockHockley	StarCare works with the Lubbock County Detention Center & StarCare Jail Contract staff to complete necessary evaluations and packets for the court.
Providing services in jail (for persons without outpatient commitment)	LubbockHockley	 StarCare's Jail-Based Competency Restoration (JBCR) program provides competency restoration services for persons identified as Incompetent to stand trial. StarCare's Jail Contract Staff provide all mental health services to inmates

Staff assigned to serve as liaison between specialty courts and services providers	LubbockHockley	JBCR, OCR, and StarCare jail contract staff, coordinate services with the courts.
Link to comprehensive services	Cochran, Crosby, Hockley, Lubbock, Lynn	OCR provides referral to intake for ongoing mental health services through StarCare. JBCR provides information on community resources at the time of referral and assists with referral for intake as requested upon possible release from the detention center. Upon completion of restoration, JBCR staff coordinates with StarCare Jail Contract staff to facilitate a smooth transition back to the post restoration caseload to monitor.

Table 12: Intercept 4 Reentry

Intercept 4: Reentry Current Programs and Initiatives:	County(s)	Plans for upcoming two years:
Providing transitional services in jails	Hockley, Lubbock	Continue efforts to identify individuals at risk who come into mainstream services and the jail setting and assist to educate and make referrals for ongoing services.
Staff designated to assess needs, develop plan for services, and coordinate transition to ensure continuity of care at release	Hockley, Lubbock	To continue efforts to educate local law enforcement and related entities involved in all counties of the catchment area and develop streamlined processes to more readily and effectively serve individuals in need of mental health and/or substance abuse services in lieu of incarceration.
Structured process to coordinate discharge/transition plans and procedures	Hockley, Lubbock	 StarCare's jail contract staff works closely with Lubbock County Re-Entry program to provide referrals to intake for ongoing mental health services.

Table 13: Intercept 5 Community Corrections

Intercept 5: Community Corrections Current Programs and Initiatives:	County(s)	Plans for upcoming two years:
Routine screening for mental illness and substance use disorders	Cochran, Crosby, Hockley, Lubbock, Lynn	StarCare's TCOOMMI program's plans for the upcoming two years include continuing to provide high-quality care and services to the people in need of TCOOMMI services in StarCare's catchment area. StarCare also plans to continue to develop, build, and strengthen relationships with county jails, law enforcement agencies, and courts.
Training for probation or parole staff	• Lubbock	StarCare's TCOOMMI program's plans for the upcoming two years include continuing to provide high-quality care and services to the people in need of TCOOMMI services in StarCare's catchment area. StarCare also plans to continue to develop, build, and strengthen relationships with county jails, law enforcement agencies, and courts.
TCOOMMI program	Cochran, Crosby, Hockley, Lubbock, Lynn	StarCare's TCOOMMI program's plans for the upcoming two years include continuing to provide high-quality care and services to the people in need of TCOOMMI services in StarCare's catchment

			area. StarCare also plans to continue to develop, build, and strengthen relationships with county jails, law enforcement agencies, and courts.
•	Staff assigned to serve as liaison with community corrections	• Lubbock	StarCare's TCOOMMI program's plans for the upcoming two years include continuing to provide high-quality care and services to the people in need of TCOOMMI services in StarCare's catchment area. StarCare also plans to continue to develop, build, and strengthen relationships with county jails, law enforcement agencies, and courts.
•	Working with community corrections to ensure a range of options to reinforce positive behavior and effectively address non-compliance	Cochran, Crosby, Hockley, Lubbock, Lynn	StarCare's TCOOMMI program's plans for the upcoming two years include continuing to provide high-quality care and services to the people in need of TCOOMMI services in StarCare's catchment area. StarCare also plans to continue to develop, build, and strengthen relationships with county jails, law enforcement agencies, and courts.

III.B Other Behavioral Health Strategic Priorities

The Statewide Behavioral Health Coordinating Council (SBHCC) was established to ensure a strategic statewide approach to behavioral health services. In 2015, the Texas Legislature established the SBHCC to coordinate behavioral health services across state agencies. The SBHCC is comprised of representatives of state agencies or institutions of higher education that receive state general revenue for behavioral health services. Core duties of the SBHCC include developing,

monitoring, and implementing a five-year statewide behavioral health strategic plan; developing annual coordinated statewide behavioral health expenditure proposals; and annually publishing an updated inventory of behavioral health programs and services that are funded by the state.

The <u>Texas Statewide Behavioral Health 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
- Gap 2: Behavioral health needs of public-school students
- Gap 3: Coordination across state agencies
- Gap 4: Supports for Service Members, veterans, and their families
- Gap 5: Continuity of care for people of all ages involved in the Justice System
- 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 people with intellectual and developmental disabilities
- Gap 10: Social determinants of health and other barriers to care
- Gap 11: Prevention and early intervention services
- Gap 12: Access to supported housing and employment
- Gap 13: Behavioral health workforce shortage
- Gap 14: Shared and usable data

The goals identified in the plan are:

- Goal 1: Intervene early to reduce the impact of trauma and improve social determinants of health outcomes.
- Goal 2: Collaborate across agencies and systems to improve behavioral health policies and services.
- Goal 3: Develop and support the behavioral health workforce.
- Goal 4: Manage and utilize data to measure performance and inform decisions.

Use the table below to briefly describe the 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.

Table 14: Current Status of Texas Statewide Behavioral Health Plan

Area of Focus	Related Gaps and Goals from Strategic Plan	Current Status	Plans
Expand Trauma-Informed Care, linguistic, and cultural awareness training and build this knowledge into services	 Gaps 7, 12 Goal 1 	 StarCare's Outpatient clinic provides mental health and primary care services to both adults and children living with serious mental illness. All staff receive training on Trauma Informed Care during their New Employee Orientation and take refresher courses yearly. Additionally training on these topics are offered throughout the year from different agencies, such as, SAMSHA, the Texas Risk Management Department, and conferences. Supervisors currently utilize team meetings to continue training and discussion around evidence-based practices. 	

funding for access to housing, employment, transportation, and other needs that impact health outcomes	3, 4, 5, 10, 12 • Goal 1	several local risk needs assessments. They are also active on many boards and with many	 StarCare will enhance participation in upcoming risk needs assessments and research new ways to be of service to the community. StarCare continues to raise their funding goal each year for the Lubbock United Way. StarCare will continue to attend local community events to spread the word about available resources. StarCare will continue to operate as an OSAR and apply for continuation of funding StarCare will review Memorandum's of Understanding yearly and research additional programs to make connections with
Explore financial, statutory, and administrative barriers to funding new or	Gaps 1, 10Goal 1	 StarCare received funding through Senate Bill 8 and HB 30 to expand Sunrise Canyon 	 The Hope center will help remove barriers to care, such as, transportation, for clients receiving care. Instead of receiving services at

Area of Focus	Related Gaps and Goals from Strategic Plan	Current Status	Plans
expanding behavioral health support services		Hospital from 45 beds to 60. This will also create one location in which a person can receive crisis, inpatient, outpatient, and follow up services. StarCare reevaluated employee wages based on the current market	different locations, they will all be located at the Hope Center. • Monitor funding opportunities and apply for grants to expand existing services and support new initiatives. • Launch workforce recruitment campaigns highlighting career opportunities in behavioral health.
Implement services that are person- and family-centered across systems of care	Gaps 1, 7, 10Goal 1	value to increase job retention and recruitment • StarCare provides services for both	 Enhance annual training initiatives to include advanced person-centered techniques and case-based examples. Develop family-focused care strategies to better engage and support family members in treatment plan

9	earl serv	ly ir vice	nter	and vent cross	ion

- Gaps 1, 2, 4, 9 11
- Goal 1
- StarCare offers
 Mental Health First
 Aide training to
 schools and many
 other
 organizations for
 - other organizations for both youths and adults. For easy access, these trainings can be virtual or in person. MHFA staff also attend local events to inform the community about mental health and to provide information about available services.
- StarCare recently trained a new staff member in MHFA and has plans to train others in order to increase accessibility
- StarCare offers mental health assessments for adults 8:00 am -12:00 pm, Tuesdays and Thursdays. Open access to Outreach, Screening, Assessment, and Referral (OSAR) is available on Mondays from 8:00 am - 3:00 pm. These hours are for those who wish to be seen earlier than they would be if they scheduled an appointment as it can take up to two weeks for an

- StarCare plans to train more staff members in MHFA and continues to work with the local community to expand our reach and provide courses to the public
- StarCare will continue to offer Open Access for mental health assessments, specifically to reach "no shows," as well as to continuously work to improve customer service.
- StarCare will continue to offer phone also attend local events to inform
 StarCare will continue to offer phone appointments and telemedicine services in order to provide access
 - Continuously improve customer service by gathering client feedback and implementing suggestions.

Area of Focus	Related Gaps and Goals from Strategic Plan	Current Status	Plans
		appointment, and for those who have been "no shows" or rescheduled their appointments in the past. StarCare offers these services as a way to lower the number of "no shows" or reschedules as well as to offer better customer service. At this time, there are mental health and substance abuse assessors dedicated to completing mental health assessments.	

Identify best practices in communication and information sharing to maximize collaboration across agencies	• Gap 3 • Goal 2	 StarCare has Memorandum's of Understanding with local housing and employment agencies. We also work with the city transportation system to ensure there is a bus route to our outpatient clinic. StarCare meets with it's senior management team once a month to discuss company policies and procedures. Senior Management is then able to rely updates to their team to make sure StarCare is performing at an optimal level and meeting expectations. StarCare has a mandatory monthly grant oversight meeting that connects program staff, senior management staff, and fiscal staff to discuss the progress and goals of each grant. Both program outcomes and financial health are discussed. 	 StarCare will review Memorandum's of Understanding yearly and research additional programs to make connections with Senior Management Team will continue to meet with staff on a predetermined bases to review program guidelines and company policies to ensure their program is functioning at an optimal level. StarCare will continue to hold mandatory monthly grant oversights meeting.
Collaborate to jointly develop behavioral health policies and implement	Gaps 1, 3, 7Goal 2	 StarCare participates in several local risk needs assessments. They 	 StarCare will continue to participate in risk needs assessments to address the concerns across local, state, and federal agencies.

Area of Focus	Related Gaps and Goals from Strategic Plan	Current Status	Plans
behavioral health services to achieve a coordinated, strategic approach to enhancing systems		are also active on many boards and with many organizations, such as, the West Texas Mental Health Collaboration, The Chamber of Commerce, the Lubbock United Way, HEARD, and ECHO.	 Encourage staff to join initiatives, organizations, and programs to enhance service delivery and efficiency.
		• StarCare meets with it's senior management team once a month to discuss company policies and procedures. Senior Management is then able to rely updates to their team to make sure StarCare is performing at an optimal level and meeting expectations.	
Identify and strategize opportunities to support and implement recommendations from SBHCC member advisory committees and SBHCC member strategic plans	Gap 3Goal 2	• The Senior Executive Team and the Senior Management Team are provided with the report from the SBHCC to review and discuss with their staff.	During Senior Management Training, the organization will discuss how we can improve and implement recommendations from SBHCC.

Increase	Cana 1	· CtarCara bas a	- StarCara is in search of a
awareness of provider networks, services and	Gaps 1, 11, 14 Goal 2	Public Information Officer who is responsible for	 StarCare is in search of a Communication Director to increase our community awareness and involvement. Create targeted outreach materials to
programs to better refer people to the appropriate level		with the pubic and is the primary	 Create targeted outreach materials to educate the community about available services and resources.
of care		public information.	 Continue to table at events in our catchment area to expand our reach of services
		 OSAR maintains a resource list that is regularly updated to reflect available resources in our area. OSAR also hosts quarterly provider meetings to connect agencies across our region 	
		 Mental Health First Aide maintains a mental health resource list that is regularly updated and it is available to staff and the community 	
		 Our Mental Health PNAC solicits in the local newspaper and on our website for new providers to provider the full level of care 	
		 StarCare participates in many events across our catchment area to bring awareness about our services 	
Identify gaps in continuity of care procedures to reduce	Gaps 1, 5, 6 Goal 2	 Staff from various community programs attend hospital staffing 	 Continue to improve communication and continuity between systems of care.

Area of Focus	Related Gaps and Goals from Strategic Plan	Current Status	Plans
delays in care and waitlists for services		regularly and assist with discharge planning related to barriers. • StarCare partners with UMC Ambulance service where persons are trained to identify persons in need of a crisis intervention rather than ER admittance. They then work with our crisis team to have the prrson assessed and transferred to the most appropriate facility. This helps reduce nonemergency admissions to our local ER.	 Continue to improve staff expertise in evidence-based curriculums. Continue to contract with local hospitals and ambulanced to reduce ER admissions and provide the most appropriate care for persons in crisis.

Develop step- down and step-up levels of care to address the range of participant needs	5, 6 Goal 2	• StarCare's Outpatient Clinic provides mental health services to both adults and children living with serious mental illness, as well as primary care for adults currently receiving services, all in one location. • Crisis transportation services are available. Medicaid transportation as well as local resources are used. StarCare reimburses staff at the approved state rate for travel related to the provision of crisis services. • StarCare offers mental health assessments for adults 8:00 am – 12:00 pm, Tuesdays and Thursdays. Open access to Outreach, Screening, Assessment, and Referral (OSAR) is available on Mondays from 8:00 am – 3:00 pm. These hours are for those who wish to be seen earlier than they would be if they scheduled an appointment as it can take up to	StarCare will continue to offer Open Access for mental health assessments, specifically to reach "no shows," as well as to continuously work to improve customer service. StarCare will continue to offer phone appointments and telemedicine services. Develop care pathways and criteria for step-up/step-down levels of care to address varying client needs. Conduct staff training on managing transitions between care levels effectively.

two weeks for an appointment, and for those who have been "no shows" or rescheduled their appointments in the past. StarCare offers these services as a way to lower the number of "no shows" or reschedules as well as to offer better customer service. At this time, there are mental health and substance abuse assessors dedicated to completing mental health assessments.

 Consumers checkin with the front desk at StarCare's Sunrise Canyon facility. The front desk receptionist emails the consumer's name, date of birth, and reason for their arrival (OSAR or mental health, or both). At that point, someone with the Triage team checks the CMHC system to be sure that screening has been completed, if not, they complete the screening. Triage then notifies someone in the Benefits Department to complete the

	Related		
Area of Focus	Gaps and Goals from Strategic Plan	Current Status	Plans
		financial process and intake paperwork. Once Benefits has completed their portion, they email an assessor, who then completes the assessment and TRAG. StarCare always offers consumers the option to be scheduled for an appointment for children and those that need an appointment due to employment or transportation challenges.	
Create a data subcommittee in the SBHCC to understand trends in service enrollment, waitlists, gaps in levels of care and other data important to assessing the effectiveness of policies and provider performance	Gaps 3, 14Goal 3	N/A	N/A

Area of Focus	Related Gaps and Goals from Strategic Plan	Current Status	Plans
Explore opportunities to provide emotional supports to workers who serve people receiving services	Gap 13Goal 3	 As part of our benefits package, employees have access to an EAP program. 	
		 Monthly emails from HR are sent out to remind staff about the available resources of the EAP. 	
		 StarCare prioritizes staff well- being through companywide events to increase job satisfaction and create a sense of community 	

Area of Focus	Related Gaps and Goals from Strategic Plan	Current Status	Plans
Use data to identify gaps, barriers and opportunities for recruiting, retention, and succession planning of the behavioral health workforce	13, 14 • Goal 3		StarCare plans to continue to complete satisfaction surveys in the future.
Implement a call to service campaign to increase the behavioral health workforce	• Gap 13 • Goal 3	• StarCare partners with universities to give hands on training at our locations to students. We also regularly review new requests for partnerships with higher education institutes.	Continue to partner with institutions of higher education

Area of Focus	Related Gaps and Goals from Strategic Plan	Current Status	Plans
Develop and implement policies that support a diversified workforce	Gaps 3, 13Goal 3	• StarCare's Quality Management Unit provides on going monitoring of the quality of access to services, service delivery, and continuity of services. This includes selfassessment for CLAS, CLAS plan, and ensures that the CLAS Plan is monitored for evaluation and improvements at least annually.	StareCare will continue to follow CLAS standards found at https://thinkculturalhealth.hhs.gov/clas and update their policy as needed.

Area of Focus	Related Gaps and Goals from Strategic Plan	Current Status	Plans
Assess ways to ease state contracting processes to expand the behavioral health workforce and services	13 • Goal 3	 StarCare reevaluated employee wages based on the current market value to increase job retention and recruitment StarCare has moved to a merit-based incentives programs to provide raises to employees in good standing StarCare provides a comprehensive benefits package helping keep medical costs low for employees and their families All main services for mental health are provided by StarCare Employees. StarCare only utilizes an outside organization for 	
Explore the use of a shared data portal as a mechanism for cross-agency data collection and analysis	Gaps 3, 14Goal 4	 Exploring shared data portals for cross-agency collaboration and streamlined data analysis. 	 Establish a data subcommittee to identify service gaps, track performance metrics, and assess policy effectiveness. Implement tools for real-time data sharing and monitoring across agencies.

Area of Focus	Related Gaps and Goals from Strategic Plan	Current Status	Plans
Explore opportunities to increase identification of service members, veterans, and their families who access state- funded services to understand their needs and connect them with appropriate resources	 Gaps 3, 4, 14 Goal 4 	• Staff members with StarCare's veterans' services program, VetStar, continue to provide virtual and in extreme cases, face-to-face services to veterans and their families. Current VetStar services include the Military Veteran Peer Network (MVPN), offering peer-to-peer support to veterans and the Supportive Services for Veterans Families (SSVF) program, offering rapid rehousing and case management services to veterans experiencing homelessness.	Expand virtual and in-person services to reach more veterans and their families. The services to reach more veterans and their families. The services to reach more veterans and their families.

Area of Focus	Related Gaps and Goals from Strategic Plan	Current Status	Plans
Collect data to understand the effectiveness of evidence-based practices and the quality of these services	 Gaps 7, 14 Goal 4 	 StarCare participates in numerous risks needs assessments across our catchment area StarCare performs participant satisfaction surveys for our program to obtain real feedback from participants StarCare has a quality management department that reviews all complaints from clients across the agency and addresses them according to our policies and procedures StarCare has a data management team in charge of tracking data that helps us to evaluate our programs, Further, our grant contracts require certain outcome measures to be reported on. StarCare maintains up to date information on our programs to meet this requirement. 	 program satisfaction surveys to evaluate the quality of our services StarCare will continue to monitor and address all complaints against StarCare to provide solutions StarCare will continue to collect and maintain updated data on outcome measures of our programs. StarCare will continue to improve our data management through training and collaboration across programs.

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, including a relevant timeline. If local priorities are addressed in the table above, list the local priority and enter "see above" in the remaining two cells.

Table 15: Local Priorities

Local Priority	Current Status	Plans
Integrated physical and behavioral health care	• StarCare is a Certified Community Behavioral Health Clinic (CCBHC), a \$4 million grant provided through the Substance Abuse and Mental Health Administration (SAMHSA). The CCBHC provides an Outreach Recovery Center (ORC); increased outpatient psychiatric services (24/7) for emergent needs; a care coordination team consisting of primary care providers, behavioral health providers, and other CCBHC partners; and a staff drop-in center. It also includes primary care for adults.	 Promote full integration and collaboration in clinical practice between primary and behavioral healthcare, support the improvement of integrated care models for primary care and behavioral healthcare to improve the overall wellness and physical health status of adults with a serious mental illness (SMI) or children with a serious emotional disturbance (SED), and promote and offer integrated care services related to screening, diagnosis, prevention, and treatment of mental and substance use disorders, and co-occurring physical health conditions and chronic diseases. Submit noncompeting application for CCBHC-IA renewal

Local Priority	Current Status	Plans
Decrease the number of people with mental illness involved in the justice system.	 StarCare offers a 23-hour Extended Observation Unit with a dedicated law officer drop-off. MCOT provides crisis services anywhere the consumer needs assistance and works to prevent law enforcement involvement whenever possible. StarCare provides both Outpatient Competency Restoration and Jail-based Competency Restoration. StarCare partners with the Lubbock Police Department's Crisis Intervention Team to provide crisis services/jail diversion. Through the Rural Crisis Response and Diversion (RCRD)/Co-responder program with the Hockley County Sheriff's Office and Levelland Police Department in Hockley County to provide crisis services/jail diversion. StarCare partnered with Hockley County to provide crisis services/jail diversion. StarCare partnered with Hockley County to implement JBCR in addition to crisis services. Talk about jail services and initial screening for MH and IDD 	• Continue to work with community resources and leadership to help eliminate the use of jails and emergency departments as the first response to mental illness. • Construction of The HOPE Center for Health and Wellbeing, a physical location wherein crisis services will be offered to people experiencing mental health distress. 24/7 services will include psychiatric crisis intervention, law enforcement/ emergency medical drop-off, on-site security, and a 23-hour Extended Observation Unit (EOU). StarCare plans to add other services such as on-site medical clearance, intensive outpatient services, Medicaid/Social Security benefit applications, and identification restoration.
Increase the number of inpatient psychiatric beds in the community	 StarCare's Sunrise Canyon Hospital (SRCH) offers a 30- bed inpatient psychiatric hospital for adults. StarCare also has formal contracts in place with other inpatient providers in the community. 	 Through Senate Bill 8 funding and HB30, StarCare is in the process of expanding SRCH to 45 beds. Continue, through the Local Planning and Network Development (LPND) process to identify potential providers.

IV.D System Development and Identification of New Priorities

Developing 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.

Use the table below to 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 people not restorable, outpatient commitments, and other people needing long-term care, including people who are geriatric 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 or components would be funded, including estimated quantity when applicable.
- Estimate the funding needed, listing the key components and costs (for recurring or ongoing costs, such as staffing, state the annual cost).

Table 16: Priorities for New Funding

Priority	Need	Brief description of how resources would be used	Estimated cost	Collaboration with community stakeholders
	Example: Detox Beds	• Establish a 6-bed detox unit at ABC Hospital.		

Priority	Need	Brief description of how resources would be used	Estimated cost	Collaboration with community stakeholders
2	Example: Nursing home care	 Fund positions for a part-time psychiatrist and part-time mental health professionals to support staff at ABC Nursing Home in caring for residents with mental illness. Install telemedicine equipment in ABC Nursing Facility to support long-distance psychiatric consultation. 		
2	Integration of the crisis system	 Create a core group of community leaders to take on the task of directing change. Focus on integration of care and improve integrated use of data between crisis services, including hospitals and law enforcement. Increase the number of chairs and staff available at StarCare's Extended Observation Unit. 	Unknown at this time	 Lubbock Sheriff's office Lubbock County Detention facility Lubbock County Police Department Lubbock Hospital Emergency rooms
3	Identify funding streams to replace the loss of ARPA special program funding	 Create a core group of community leaders to take on the task of directing change. Partner with other service providers. Research, identify, and apply for new funding opportunities such as grants. 	\$1,216,518.00	

Priority	Need	Brief description of how resources would be used	Estimated cost	Collaboration with community stakeholders
4	Targeted expansion of community care capacity to divert people from hospitalization and jail bookings	 Create a core group of community leaders to take on the task of directing change. Focus on integration of care ad improved and integrated use of data between crisis services, including hospitals and law enforcement. 	Unknown at this time	
1	Increased bed day rate and start up funds for hospital expansion	 Create a core group of community leaders to take on the task of directing change. Through the LPND process, identify potential partners to provide inpatient psychiatric beds locally. 	Unknown at this time	
5	Funding for diversion services, (expanded crisis, EOU, COR responders, ORC) for pre and post crisis services	 Create a core group of community leaders to take on the task of directing change. Focus on integration of care ad improved and integrated use of data between crisis services, including hospitals and law enforcement. Research, identify, and apply for new funding opportunities such as grants. 	\$6,278,000	

Appendix A: Definitions

Admission criteria – Admission into services is determined by the person'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.

Community Based Crisis Program (CBCP) - Provide immediate access to assessment, triage, and a continuum of stabilizing treatment for people with behavioral health crisis. CBCP projects include contracted psychiatric beds within a licensed hospital, EOUs, CSUs, s, crisis residential units and crisis respite units and are staffed by medical personnel, mental health professionals, or both that provide care 24/7. CBCPs 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 or LBHA funding.

Community Mental Health Hospitals (CMHH), Contracted Psychiatric Beds (CPB) and Private Psychiatric Beds (PPBs) – 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 person's ability to function in a less restrictive setting.

Crisis hotline – 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 (CRU) – Provide community-based residential crisis treatment to people 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 units are not authorized to accept people on involuntary status.

Crisis respite units – Provide community-based residential crisis treatment for people 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 people with housing challenges or assist caretakers who need short-term housing or supervision for the person they care for to avoid mental health crisis. Crisis respite units are not authorized to accept people on involuntary status.

Crisis services – Immediate and short-term interventions provided in the community that are designed to address mental health and behavioral health crisis and reduce the need for more intensive or restrictive interventions.

Crisis stabilization unit (CSU) – The only licensed facilities on the crisis continuum and may accept people 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 people with a high to moderate risk of harm to self or others.

Diversion centers - Provide a physical location to divert people at-risk of arrest, or who would otherwise be arrested without the presence of a jail diversion center and connects them to community-based services and supports.

Extended observation unit (EOU) – Provide up to 48-hours of emergency services to people experiencing a mental health crisis who may pose a high to moderate risk of harm to self or others. EOUs may accept people on emergency detention.

Jail-based competency restoration (JBCR) - Competency restoration conducted in a county jail setting provided in a designated space separate from the space used for the general population of the county jail with the specific objective of attaining restoration to competency pursuant to Texas Code of Criminal Procedure Chapter 46B.

Mental health deputy (MHD) - Law enforcement officers with additional specialized training in crisis intervention provided by the Texas Commission on Law Enforcement.

Mobile crisis outreach team (MCOT) – A 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 people in the community.

Outpatient competency restoration (OCR) - A community-based program with the specific objective of attaining restoration to competency pursuant to Texas Code of Criminal Procedure Chapter 46B.

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Appendix B: Acronyms

CBCP Community Based Crisis Programs
CLSP Consolidated Local Service Plan

CMHH Community Mental Health Hospital

CPB Contracted Psychiatric Beds

CRU Crisis Residential Unit
CSU Crisis Stabilization Unit

EOU Extended Observation Units

HHSC Health and Human Services CommissionIDD Intellectual or Developmental Disability

JBCR Jail Based Competency Restoration

LMHA Local Mental Health Authority

LBHA Local Behavioral Health Authority

MCOT Mobile Crisis Outreach Team

MHD Mental Health Deputy

OCR Outpatient Competency Restoration

PESC Psychiatric Emergency Service Center

PPB Private Psychiatric Beds

SBHCC Statewide Behavioral Health Coordinating Council

SIM Sequential Intercept Model