Convening of the Texas Child Mental Health Care Consortium (TCMHCC)
February 8, 2021
10:00 AM – 1:00 PM
Minutes

I. Call to order and roll call
- Dr. Lakey, presiding officer of the Consortium, called the meeting to order.
- 31 Executive members were in attendance. See attached attendance for a full list of attendees.

II. Review and approve the following item:

a. Minutes from January 26, 2021 Executive Committee meeting

> Dr. Podawiltz moved to approve minutes. Dr. Tamminga seconded. Minutes were unanimously approved.

III. Updates on the following activities associated with implementation of the TCMHCC. The full Executive Committee may review, receive and/or provide information and/or make recommendations from the items discussed and take appropriate action.

a. Update on 87th Texas Legislative session items pertinent to children’s mental health, the TCMHCC, and other mental health related topics.

   - University of Texas System Administration update on TCMHCC and the 87th Texas Legislative session
     - Sean Griffin provided an update:
       o The Senate version of the budget has full funding for TMCHCC. The Rider was revised to get rid of some of the transitional items.
       o The House version does not include increased funding & doesn’t change the Rider.
       o The Governor’s budget includes the Consortium as one of his priorities. Although the Governor doesn’t directly play a role in writing the budget, it’s great to have his support.
       o No bills have been filed that would adjust Consortium statutes and we haven’t seen references in other legislation adding duties or pointing to the Consortium.
       o From a general sense, healthcare – including telehealth and mental health – continue to be a priority.

   - Meadows Mental Health Policy Institute update on state mental health policy and funding, the 87th Texas legislative session items pertinent to TCMHCC and children’s mental health, and other relevant updates/information.
     - Dr. Andy Keller presented and discussed the following key points:
       o The expected overall budget shortfall is significantly less than expected.
       o There have been some early wins in 2021 including the extension of the 1115 waiver through September 30, 2030, and an increase in funding for behavioral health in HB 1 & SB 1, including funding for mental health grant programs.
Securing gains made in the telehealth arena are critical and it’s important that they include an audio-only element. Dr. Keller encouraged members to look at HB 974 and SB 412.

State hospital redesign is moving forward.

There’s a need to implement collaborative care (CoCM) in Medicaid to reduce suicide deaths. A bill relating to this may come out in the coming weeks.

b. TCMHCC communications and marketing
   - Daniel Oppenheimer provided an update:
     o The TMCHCC website was shown, highlighting a change to a bar on the front page. It now includes the national suicide helpline & directs people to more Texas resources.
     o A careers page has been created and consortium members want to advertise consortium-specific job openings let Daniel know.
     o In coordination with Dr. Williams & the COSH team, a newsletter was sent out in January through the Texas Pediatric Society. It included an introductory CPAN video and a link to the interactive map on how to access CPAN from various regions. The next newsletter is scheduled to go out this week and includes a letter from the past president of TPS with listings of upcoming education webinars.
     o A few new things have been added to Canva.
     o Later this week the Texas collaborative for Healthy Mothers & Babies summit will be held. Registration has closed, but if interested, reach out to Daniel.

c. Program evaluation of TCMHCC by University of Texas at Austin
   - Dr. Molly Lopez thanked everyone for the feedback received. She didn’t have an update at this time.

d. Research Initiative by University of Texas Southwestern highlighting the work of the depression and suicide research team. Additional updates from UT Dell regarding the trauma research efforts may also be provided, as needed.
   - Dr. Trivedi provided an update:
     o All 12 nodes are certified, trained, and ready to go.
     o Numerous meetings are taking place at a variety of levels to keep the forward momentum of the research network.
     o 194 individuals have been enrolled and close to 700 study visits completed.
     o A variety of slides were shown including enrollment by HRI, age, gender and race makeup of participants, distribution of the severity of symptoms, suicidal thoughts, primary and comorbid diagnoses, traumatic events encountered in children’s lives, and service utilization.
     o There is a quality assurance plan for each node.
     o Applied for a $14M PCORI (patient centered outcomes research institute) grant for comparing two approaches to suicide prevention. All 12 nodes were involved in the submission.
   - Dr. Wakefield reiterated how exciting it is to have these networks that will allow us to accurately assess the youth in our state so we can better target interventions in the future.
Dr. Blader praised Dr. Trivedi for his detailed information and noted that looking at such a granular level at what’s going on when people come for these therapies will make an immense difference in terms of outcome assessments.

Dr. Tamminga asked Dr. Trivedi if he thought he would reach target numbers by the end of the year. Dr. Trivedi confirmed that he believes the target will be achieved given that the nodes are now primed and there’s a rapid increase in participants.

Dr. Wakefield praised Dr. Trivedi’s hub team for the immense amount of guidance they are providing, particularly to HRIs that may have no research infrastructure. She noted that the pace may be slower in some cases than what was projected as a lot of IRBs have had to flex in their rules on how to do research in a time of COVID. For example, IRBs won’t allow consent without face to face interaction although treatment can be done via telemedicine.

Several other members congratulated Dr. Trivedi on this progress and reiterated the importance of the network.

Dr. Lakey summarized that the networks are up & running, recruiting well, there’s peer to peer learning & collaboration across systems, helping each other increase the research across the state and already looking at federal funding that would be brought in by PCORI. He congratulated the group on their work and added that we’re improving the quality of care in the state of Texas and bringing in additional funds to continue to improve care.

e. External Evaluation of TCMHCC by University of Texas Health Science Center School of Public Health
   - Dr. Savas provided an update:
     o Jackie Klotz was introduced as a new team member who will be working to build databases.
     o Completed process mapping. Will be baselining implementation plans so the team can review implementation that is actually happening vs implementation as planned. Doing this at HRI, Clinic & School levels.
     o Have data on enrolled schools for TCHATT but still working to do this for CPAN. They need to know the total population in order to select a representative sample to interview.
     o Will be sending out a readiness survey to around 250 schools and 500 clinics very soon. The plan is to interview 2-3 different people at each site selected in order to have different perspectives on how the organization works to implement the program. This will help us understand organizational factors that affect implementation.
   - Dr. Peskin informed the group that they will be sending out an email to start the process of identifying the right people to participate in the upcoming activities. The group was asked to be on the lookout for emails from Project Coordinator Erica Frost.

f. Survey result information regarding the Child and Adolescent Psychiatry Fellowship
   - Dr. Newlin provided an update on positions filled with SB11 funding:
     o BCM - 2
     o UTHSCH - 2
     o UTHSCSA - 2
     o TAMUHSC - 1
     o UTSW - 1
- UT Dell - 1
- Three programs working to establish new child fellowship programs in 2022 - TTUHSC, UTHSCT & UTGRV.
- Dr. Lakey asked that we look at total CAP fellowship numbers training in Texas for previous and current year to show that total numbers are going up.
- <<Action Item: If anyone has post-match fellow let Dr. Newlin know>>
- Dr. Nemeroff asked how the match when nationally. Dr. Wagner thought about 25-30% didn’t fill, highlighting the national issue of filling open CAP fellowship positions.

g. Update from The Hogg Foundation for Mental Health including information about the Texas Guide to the Mental Health System and other information that may be of interest to the TCMHCC.
- Dr. Martinez shared a presentation on Understanding Mental Health Systems and Services in Texas. Key points form the slides included:
  - The Hogg Foundation released a mental health declaration of racism as a mental health crisis. Have had over 183 organizations sign on. If anyone wants to sign on, reach out.
  - Hogg Foundation is asking stakeholders and policy makers to consider standing up an Office of Health Equity to correct inequities inherent in the systems of services & supports in Texas.
  - The Hogg -Foundation received $1.1M from the Chan Zuckerberg Initiative (CZI) to advance mental health & well-being for youth of color and their families.
  - If anyone would like a physical copy of the mental health guide, email Hogg-ED@Austin.utexas.edu with a physical address and they will send one.
- The point was raised that identifying and getting help for students would impact the mental health resources needed in the criminal justice system.
- It was also highlighted that in Austin now, if someone calls 911 they will have the option of selecting mental health and circumvent the police.
- Dr. Martinez was asked how to connect stakeholders to potential CZI resources. He indicated that members can reach out to him directly.
- Luanne Southern emphasized how important the resource guide is seeing how our services fit into the greater continuum of services for children’s mental health across the state.

h. Update from Health and Human Services Commission on information relevant to the Texas children’s mental health service delivery system, the TCMHCC, and other information that may be of interest to the TCMHCC.
- Sonja Gaines shared a presentation outlining:
  - Behavioral Health Coordinating Council Progress 2016-2020
  - Children’s Community Mental Health Services offered through contracts that HHSC has with providers.
  - Graph depicting Children’s Mental Health Waiting List and Children Served FY 2014-FY 2020
  - Youth Empowerment Services (YES Waiver)— services provided through LMHAs & private providers to work with children that need more support than what they’d get in traditional outpatient settings
  - Residential Treatment Center Custody Relinquishment Avoidance Project
  - FY20 Coordinated Specialty Care services
Graph depicting Mental Health First Aid Trainings provided FY 2014 – FY2021
- Community Mental Health Grant Children-Directed Projects (children served, funds awarded, number of projects, counties involved, direct service types, etc.)
- Substance Use Disorder Treatment Expansion impact on waitlist
- www.Mentalhealthtx.org – Statewide Behavioral Health Coordinating Council website to help Texans locate mental health and substance use resources
- COVID-19 Mental Health Support Line
- HHSC Crisis Counseling Program
- Future plans
- Fiscal Year 2020 in Review - Annual Report

i. Additional updates (if needed) on other activities associated with implementation of TCMHCC initiatives.

IV. If necessary, closed session for consultation with attorney regarding legal matters, related to posted items, pursuant to Section 551.071 of the Texas Government Code

V. Discuss, consider, and if appropriate, approve information and updates provided by the Baylor College of Medicine in the role of the Centralized Operations Support Hub (COSH) relating to implementation of the COSH, and/or information provided by HRIs relating to CPAN and TCHATT. The full Executive Committee may review, receive, and/or provide information and/or make recommendations from the items discussed and take appropriate action.

a. COSH related items identified by the Baylor College of Medicine and members of the Executive Committee (may include Trayt and/or Lantana updates)
   - Dr. Williams shared a presentation outlining:
     - Operational Updates including Marketing (Texas Pediatric Society, Texas Association of Family Physicians)
     - Social Media – Guidelines for Instagram
     - Motion made by Dr. Tamminga to move forward with the Social Media Plan and Guidelines presented. Dr. Wakefield Seconded. Unanimously approved.
     - Provided presentation to Superior Health Plans & Texas Association of Child & Family Services.
     - Will start to organize efforts to have the other HRIs assist in presenting to state organizations.
     - Data governance council met with primary discussion at last meeting around data definitions.

b. Community Psychiatry Workforce Expansion update
   - Dr. Williams provided an update on CPWE:
     - Jennifer Evans continues to work with individuals on the Welnity implementation, including the state.
   - Dr. Pliszka informed the group that there is a meeting scheduled with all of the coordinators / medical directors at each of the sites along with Danette Castle to continue to look at the metrics and other issues related to CPWE. It is anticipated that this will become a regular meeting that will replace CPWE workgroup.
c. CPAN update

- Dr. Williams presented updates on CPAN:
  o 11 out of 12 teams are fully operational with the Lantana platform
  o All 12 teams are fully operational on Trayt
  o External evaluation team will have training session with Trayt this month
  o Implementation topics including Clinic enrollment, physician call back and Lantana Call definitions.
  o → Dr. Williams made a motion to allow for PCP Clinics and Teams to verbally agree to enroll in CPAN services. In addition, Trayt will be modified to provide information on the verbal agreement. Dr. Tamminga Seconded. Motion unanimously approved.
  o The Trayt Dashboard was brought up showing current metrics

d. TCHATT update

  • TCHATT service definitions and protocols
    a. Re-referrals
    b. Transitional services
    c. Other items

- A slide on TCHATT Definition was brought up and presented by Dr. Williams.
- Other updates were provided:
  o 11 of 12 HRI teams are live.
  o There are 2 outstanding joinder agreements for utilization of Trayt.
  o Continuing to work through standardization across hubs.
  o Stepped-care model implementation meetings have started under the direction of Drs. Storch and Blader.
  o TCHATT Trayt Development Timeline shown along with details on items that are being developed.
  o January metrics shown.
  o Graph showing percentage of TCHATT service types (Therapy, Psychiatry, Both, Other) shown
  o Additional graphs on patient demographics including ethnicity, gender and age shown.

VI. Adjournment

Next meeting March 8, 2021 10:00 – 3:00.
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<td>Wayne Goodman, MD</td>
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<td>2</td>
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<td>Laurel Williams, DO</td>
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<td>Texas A&amp;M University System Health Science Center</td>
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<td>Sonja Gaines, MBA</td>
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<td>David Lakey, MD</td>
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