**Convening of the Texas Child Mental Health Care Consortium (TCMHCC)**

September 20, 2022

10:00 AM – 3:00 PM

The University of Texas System

210 W. 7th Street., 2nd Floor Board Room

Austin, TX 78701

**Minutes**

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**The Texas Child Mental Health Care Consortium (TCMHCC) will convene a videoconference meeting pursuant to Texas Government Code Section 551.127 on September 20, 2022, according to the following agenda. The Chairperson will be present, and will preside over the meeting, at the posted location.**

1. **Call to order and roll call**

- Dr. Lakey, presiding officer of the Consortium, called the meeting to order.

- 24 executive committee members were in attendance. See attached attendance for a full list of attendees.

1. **Review and approve the following item**
2. Minutes from the August 29, 2022, Executive Committee meeting.

**→ Dr. Wagner made a motion to approve the minutes. Dr. Vo seconded. Minutes were unanimously approved.**

1. **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.**
2. **TCMHCC communications, outreach, and engagement by The University of Texas at Austin**

- Melanie Susswein presented an update from the Center for Health Communications.

* + Timeline was shown with the year 2 endeavors.
	+ Their team has individualized materials for each health-related institution.
	+ Social media impact has a 12,047 total cumulative reach.
	+ Digital outreach started August 1st.
	+ There was an increase in website traffic with 5,323 users during August.
	+ A 3-minute CPAN video was completed with key messaging.
1. **Program Evaluation - The University of Texas at Austin**

- Dr. Molly Lopez presented an update from the internal evaluation team.

* Want to consider an evaluation measure for TCHATT outcomes.
* Internal evaluation team reviewed global symptom and functioning scales along with the TCHATT team’s existing measures.
* Dr. Lopez provided a recommendation for all teams to collect the Columbia Impairment Scale (CIS) from a caregiver at program entry (or within a window of entry), at the 4th TCHATT session, and every additional 5 sessions (if applicable).
* This measure was chosen because it measures functioning and is a low burden to families.
* The Columbia Impairment Scale is 13 items that measures functioning and impairment.
* Dr. Trivedi asked if the CIS is best used for people with significant illness or for those with early impairment. Dr. Lopez responded that more research has been done on those with significant impairment.
* Dr. Mitchell inquired about the age range for the CIS. Dr. Lopez answered that the age range is 5-18 years old. Dr. Mitchell further inquired if the Pediatric Symptom Checklist was considered and how it compares to the CIS. Dr. Lopez responded that they PSC was strongly considered but that the group felt that it overlapped.

**→ Dr. Podawiltz made a motion to use the Columbia Impairment Scale as an outcome measure for TCHATT. Dr. Nemeroff seconded. Motion approved.**

* Dr. Lopez continued her presentation to include decisions on specialized campuses
* Teams have been examining campuses that Texas Education Agency (TEA) has identified as either charter of public-school campuses
* Need to decide which campuses are included in statewide expansion of TCHATT.
* Molly provided a table of locations and recommendations on whether to include the locations in the expected statewide expansion for discussion
	+ - Dr. Wakefield asked for explanation of what a university residential program is considered. Dr. Lopez defined it as on-campus programs that some universities have for juniors and seniors that allow students to receive high school and college credits.
		- Dr. Lakey noted we are trying to clean up the denominator in our reporting for TCHATT. Locations on the left of the table that were recommended to not be included will not be part of the denominator.
		- Dr. Martin asked how charter schools fit into the decision on specialized campuses as there is not a way to have a contact with the school if the kids are at home. Dr. Lopez responded that we are not excluding charter school broadly and to focus on charter schools they feel have the infrastructure. Dr. Lakey advised to evaluate on an individual basis.
		- Dr. Liberzon asked if the performance measure is accurate for any school as some schools are not likely to enroll if they currently have the existing support. Dr. Lakey emphasized to offer TCHATT to any school that wants it. Dr. Lopez said that they are asking schools to note why they have declined the service.
		- Dr. Blader asked if homebound students are different from home schooled students and how it would impact the denominator. Dr. Lopez defined the homebound students as those who need to receive school at home due to medical or other reasons. Dr. Lopez further responded that they will count the census for homebound.

**→ Dr. Wagner made a motion to approve the TCHATT decisions of specialized campuses. Dr. Ibrahim seconded. Motion approved.**

1. **External Evaluation - The University of Texas Health Science Center Houston - School of Public Health**

- Dr. Savas presented an update from the external evaluation team.

* + - Preliminary findings from the TCHATT school survey were shared.
		- For the survey, a diverse sample of 150 school districts across the 12 health-related institutions were identified.
		- TCHATT school survey closed on 9/16/22 with 197 completed responses.
		- Goal of survey from school perspective is to see how the program is working.
		- Measures include school staff perceived parental acceptance of TCHATT, student outcomes, and recommendations.
		- Characteristics of survey respondents were shown.
		- Preliminary results of perceived outcomes of TCHATT were shown.
	+ Counselors reported their perception of the program. Most counselors agreed that students are more involved in school, students had a decrease in behavioral incidents, and students had better attendance at school after being seen through TCHATT.
	+ 88% of respondents said they would recommend TCHATT to other schools.
	+ Other external evaluation team activities were shared.
	+ CPAN provider surveys are in progress.
	+ The external evaluation team has been cleaning Trayt data for year 2 analysis of CPAN and TCHATT.
	+ Dr. Wakefield wanted to know if there are any recommendations that the external or TCHATT teams can do to get more clarity for the perceived outcomes for TCHATT data. Dr. Savas stated that 21% reported that they do not coordinate for the TCHATT program. She stated the possibility that they didn’t get the correct staff to complete the surveys.
1. **Updates on the following activities associated with implementation of American Rescue Plan Act funded TCMHCC initiatives. The full Executive Committee may review, receive and/or provide information and/or make recommendations from the items discussed and take appropriate action.**
2. **Fiscal Agent - The University of Texas at Austin**

- Linda Haster provided a high-level update as the fiscal agent.

* + Received an executed agreement back from the Texas Higher Education Coordinating Board (THECB).
	+ Gave subawards out to all health-related institutions and Meadows.
	+ Received 8 out of the 13 back so far.
	+ 1.8 million was spent between the health-related institutions through August 31st.
1. **Overall administration – The University of Texas System**

- Lashelle Inman provided a verbal update from the overall administration.

* + All agreements are in place between UT System, UT Austin and the Texas Higher Education Coordinating Board.
	+ Working on amendments for the changes for fiscal year 2023 budgets.
	+ Sarah McLaughlin has been working on status reports templates for ARPA projects.
	+ Will be getting fiscal information from UT Austin about the ARPA expenditure and data from the monthly status reports to compare progress based on expenditure.
	+ Jonathan Lewis added that there have been requests for changes to ARPA budgets. In process of reviewing changes to those requests.
	+ Dr. Trivedi asked if there is any flexibility in budget since the timeline has shifted. Lashelle responded that ARPA funds can be expended through November 2023 with no guarantee beyond that date. She noted that since the allocation is a lump sum, teams can try to accelerate the work by expending more of the funds now since teams will not have 2 years to expend the funds.
1. **Perinatal Psychiatry Access Network – Texas Tech University Health Science Center**

- Dr. Wakefield provided a verbal update on PeriPAN.

* + Chose August 18th launch date as that is when the Trayt portal would be available.
	+ Have received PeriPAN calls.
	+ Pilot teams have been working to engage obstetricians in their regions.

- Dr. Williams included an update during the COSH presentation

* COSH role is to continue to support the process like making changes to Lantana to support the project
1. **Collaborative Care – Meadows Mental Health Policy Institute**

- Dr. Hani Talebi provided an update on Collaborative Care.

* + Virtual kickoff with all the HRIs scheduled for October 3rd to discuss next steps.
	+ In October they want to start having individual meetings tailored to each health-related institution.
	+ Goals for the October 3rd meeting are to give a brief reorientation of the collaborative care model, outline responsibilities, and reporting.
1. **Substance Use Disorder services – The University of Texas Health Science Center at San Antonio**

 - Dr. Blader provided a verbal update on substance use disorder services.

* + - All sites have the SBIRT model as a standard operating procedure.
		- UT Tyler withdrew from giving the service.
		- Some sites are still hiring to build their teams.
		- UT Health San Antonio and Houston teams have been taking referrals.
		- Hoping to have data on kids screening positive through TCHATT by November or December.
1. **Youth Aware of Mental Health – The University of Texas Southwestern Medical Center**

– Dr. Trivedi provided an update on YAM

* Student reach and classes data were shown to include 2,100 students and 120 classes through fall 2022.
* Schools and districts engaged by health-related institutions was shown
* Goal for expansion is to increase the number of schools per each HRI and train their school personnel.
* Dr. Wakefield asked about talking with Texas Education Agency (TEA) about the consortium’s programs to be a resource and not duplicate efforts. Dr. Trivedi responded that TEA has endorsed YAM as an evidence-based program for school mental health. Dr. Lakey added that the consortium’s mandate is to expand TCHATT statewide and other agencies have mental health programs we must respect.
1. **Safe Alternatives for Teens and Youths – Baylor College of Medicine**

- Dr. Williams provided an updated during the COSH presentation

* + UTSW and Baylor teams will be working closely together to develop the processes for SAFETY-A (formerly known as FISP)
	+ Program helps a primary care team manage a mental health emergency in the office including suicidal and self-injurious behaviors
	+ Project can start now that new hire has started at Baylor College of Medicine
1. **Informational presentations from the UT System, and Health Related Institutions (HRIs) about the 2024-2025 proposed TCMHCC budget and initiatives. The full Executive Committee may review, receive, and/or provide information and/or make recommendations from the items discussed and take appropriate action.**

**-**Jonathan Lewis presented the proposed budgets for FY24-25.

* There was a significant increase from the current funds.
* Grand total ask combined from all HRIs is over $340 million.
* Total budget ask was about $100 million dollars more with $54 million including TCHATT expansion costs.
* $23.5 million is for the workforce development submitted by the HRIs
* TCHATT total ask is $175.1 million with a breakdown of $147.4 million for TCHATT, $8.6 million for substance use disorder services, and $19.1 million for Youth Aware of Mental Health (YAM)
* CPAN total ask is $63 million with a breakdown $39.4 million for CPAN, $18 million for PeriPAN, and $5.5 million for FISP/Safety-A
* Workforce development ask is $64.3 million with a breakdown of $32.6 million for CPWE, $18.5 million for additional workforce development issues, and $13.1 million for CAP fellowships
* Research needs to be discussed more
* Administration ask is $5.3 million
* Preliminary budget by HRI and Program were shown
	+ - Sonja Gaines asked if the budget for YAM training is part of expansion. Dr. Trivedi responded that some of the HRIs chose not to participate in YAM and now they want to expand to more schools. Dr. Lakey restated that more HRIs participating with additional schools.
		- Sonja asked how many schools is YAM currently serving. Dr. Trivedi responded that people were trained without the funds.
		- Dr. Lakey suggested that Dr. Trivedi refine the numbers again and have additional conversation to make sure the program is fully implementable.
		- Danette Castle asked if the budget is getting translated to an exceptional item for legislative request. Dr. Lakey responded that he is having conversations with elected leadership to follow the direction of the LBB on how to handle the budgets.
		- Dr. Vo wanted explanation of the $9 million listed as “to be determined” for research. Dr. Lakey responded that last legislative session, the group did not ask for any additional funding and it became challenging. Number was based on experience from what the hubs could need to continue to explore other areas.

**→ Dr. Podawiltz made a motion to tentatively approve the budget with the understanding that the YAM budget needs to be refined. Dr. Nemeroff seconded. Motion approved.**

* 1. **Current and proposed workforce initiatives**
		1. **Final workforce white paper recommendations– UT System**

- Sarah McLaughlin presented workforce recommendations in response to barriers to achieving education and licensure

1. Loan repayment for college students who commit to behavioral health careers in the public sector
	* Tuition assistance similar to military service model
2. Paid internships for students who serve with community-based public sector employers
	* Statewide paid internships create a pipeline from clinical internship to employment
3. Innovative ways to provide clinical supervision hours for licensure
	* Statewide remote supervision network
4. Directing streamline licensure for various types of mental health professionals
	* Directing licensure boards to streamline the process
5. Expanding the consortium’s child and adolescent psychiatry fellowships through multi-boarding physicians
6. Adjusting state salary schedules to account for cost of living across the state
	* Dr. Lakey provided some background to why workforce issues came up after the Uvalde shooting.
	* Sonja Gaines noted that workforce is the greatest challenge for the LMHAs as they are struggling with vacancy rates.
	* Dr. Lakey suggested to share the workforce document with the consortium’s members first before sharing with others.
	* Dr. Blader voiced his concern for pre-licensed staff about billing for their services, suggested loan repayment for people who are already qualified to lure them to Texas, and asked if anything was added to offset costs for supervisees. Sarah responded that supervision cost was taken into consideration for supervisees and the supervisor’s effort.
	* Dr. Wakefield asked if family medicine doctors were considered as she thinks they are most prevalent is rural areas, are double boarded and might help reach the target population. Dr. Lakey answered that family medicine doctors are not in this recommendation at this time but could be added later.
		+ **ACTION ITEM – Executive committee members to submit their feedback and recommendations for the white paper workforce document within a week to Dr. Lakey.**

**→ Dr. Podawiltz made a motion to move forward with the workforce paper with edits suggested by the executive committee before providing to the legislature. Dr. Farmer seconded the motion. Motion approved.**

* + 1. **Other workforce projects with potential for expansion across Texas – HRIs**
			1. **Community Psychiatry Workforce Expansion (CPWE)**
			2. **Child and Adolescent Psychiatry Fellowships (CAP)**
* Dr. Babatope explained that UT Health Houston wants to expand their psychology internship program, expand the LCSW fellowship program and the CAP fellowship. Also want to expand into other LMHAs.
* Dr. Wakefield discussed how Texas Tech University Health Science Center has added workforce expansion through all of their programs from expansion for LPC Associates, LPC Supervisors, and their post doc child psychology fellowship.
* Dr. Podawiltz explained the American Nursing Association’s residency for post psych nurses that spans 1 year. They want to add a 6 month child and adolescent component.
* Dr. Martin added that Texas Tech University Health Science Center El Paso started a child psychology postdoctoral fellowship.
	1. **Current and proposed Child Psychiatry Access Network (CPAN) and Texas Child Health Access Through Telemedicine (TCHATT) initiatives – HRIs**
	2. **Current and proposed research initiatives**
		1. **Youth Depression and Suicide Research Network – UT Southwestern Medical Center and Texas Tech University Health Sciences Center**

- Dr. Trivedi presented an update.

* The research network consists of 12 health-related institutions that are trained to implement research projects
* Follows youth across 2 years who have screened positive for depression or suicidality, or are in care for depression
* Have completed over 7,000 research visits
* First 24 month follow up will start in the coming weeks
	+ 1. **Childhood Trauma Research Network – University of Texas at Austin Dell Medical School and University of Texas Medical Branch**

- Dr. Nemeroff provided a verbal update.

* + - * Dr. Karen Wagner is the co-lead and Dr. Jeff Newport oversees operations for the trauma network.
			* Almost 1,400 children have been evaluated during the aftermath of trauma
			* 66% have returned for their 1-year follow-up visit
			* 6 publications are in process with the network’s findings to be published
			* Now incorporating measurements of social media use and the type of social media by the children being evaluated
			* Also measuring children who have been victims of violence perpetrators of violence
			* For the future, want to train each HRI in evidence-based treatment for trauma and train 2 psychologists at each HRI
			* Will also be applying for NIH grants to help
1. **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 Health-Related Institutions relating to the CPAN, the TCHATT, and the CPWE. The full Executive Committee may review, receive, and/or provide information and/or make recommendations from the items discussed and take appropriate action.**
2. **COSH**

- Dr. Williams presented an update on the COSH to include CPAN, PeriPAN and TCHATT.

1. **CPWE**
	* No update provided at this time
2. **CPAN**

-Dr. Williams provided an update during the COSH presentation

* ARPA Initiatives:
* Texting option
	+ Pilot was completed over the summer
	+ CPAN super users gave their feedback about the texting process
	+ Information from the pilot was provided to the communications team
	+ Go live scheduled for beginning of October for all CPAN providers to utilize the texting option
* Direct consultation
	+ 5 HRIs are piloting in their region
	+ 1-time consultation either in-person or telehealth
	+ Will ask for feedback from the primary care physicians on this process
		- Communications team has created FAQs for PCPs and families about the process for a direct consultation
	+ Trayt dashboard was shown for CPAN
		- * Over 8,900 providers are enrolled across the state
			* Over 1,700 clinics are enrolled across the state
			* Over 12,000 consultations have been completed
			* 97.6% response time within 30 minutes for a child psychiatrist to speak with a primary care physician
1. **TCHATT**

- Dr. Williams provided an updated during the COSH presentation

* + School portal is now complete to capture school referrals
	+ Information can be shared using the HIPAA compliant upload feature
	+ Total referrals: 662
	+ Total enrolled: 298
	+ Total TCHATT sessions for August 2022 is 6,609
1. **Data Management and Governance Committee**

- Dr. Vo mentioned there are no updates to provide at this time.

1. **Presentation from Texas Tech University Health Science Center – El Paso on the outreach and engagement efforts they have implemented to increase enrollment in CPAN and TCHATT.**

- Dr. Sarah Martin presented on her team’s face-to-face outreach efforts across their region.

* Their team had a planning retreat to plan outreach for the whole year for both TCHATT AND CPAN.
* It was helpful to wear their institution’s clothing with logos.
* They tried to make appointments in every area they were visiting.
* Talking with the locals help the team better understand the region.
* It was helpful to have the doctor join the outreach.
* They took samples of forms that were needed for TCHATT and CPAN in folders to each appointment.
* Dr. Martin showed an example of their travel itinerary throughout the region.
* To help the process move forward with interested school districts, the outreach team would schedule the school districts for initial trainings during the follow-up phase.
1. **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.**
2. **Adjournment**

Next meeting October 25, 2022, 10:00 AM – 3:00 PM

**Attendance List**

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| --- | --- | --- | --- |
| # | Institution/ Organization | Executive Committee Member | Attended? |
| 1 | Baylor College of Medicine | Wayne Goodman, MD | Y |
| 2 | Baylor College of Medicine | Laurel Williams, DO | Y |
| 3 | Texas A&M University System Health Science Center | Israel Liberzon, MD | Y |
| 4 | Texas A&M University System Health Science Center | R. Andrew Harper, MD | N |
| 5 | Texas Tech University Health Sciences Center | Sarah Wakefield, MD | Y |
| 6 | Texas Tech University Health Sciences Center | Tarrah Mitchell, MD | Y |
| 7 | Texas Tech University Health Sciences Center at El Paso | Peter Thompson, MD | N |
| 8 | Texas Tech University Health Sciences Center at El Paso | Sarah Martin, MD | Y |
| 9 | University of North Texas Health Science Center | Alan Podawiltz, DO, MS  | Y |
| 10 | University of North Texas Health Science Center | David Farmer, PhD, LPC, LMFT, FNAP | Y |
| 11 | Dell Medical School at The University of Texas at Austin | Charles B Nemeroff, MD, PhD | Y |
| 12 | Dell Medical School at The University of Texas at Austin | Jeffrey Newport, MD, MS, MDiv | Y |
| 13 | The University of Texas M.D. Anderson Cancer Center | Daniel Tan, MD | N |
| 14 | The University of Texas M.D. Anderson Cancer Center | Rhonda Robert, PhD | N |
| 15 | The University of Texas Medical Branch at Galveston | Karen Wagner, MD, PhD | Y |
| 16 | The University of Texas Medical Branch at Galveston | Alexander Vo, PhD | Y |
| 17 | The University of Texas Health Science Center at Houston | Jair Soares, MD, PhD | N |
| 18 | The University of Texas Health Science Center at Houston | Taiwo Babatope, MD, MPH, MBA, ABPN | Y |
| 19 | The University of Texas Health Science Center at San Antonio | Steven Pliszka, MD | N |
| 20 | The University of Texas Health Science Center at San Antonio | Joseph Blader, PhD | Y |
| 21 | The University of Texas Rio Grande Valley School of Medicine  | Diana Chapa, MD | Y |
| 22 | The University of Texas Rio Grande Valley School of Medicine  | Michael Patriarca, MBA | Y |
| 23 | The University of Texas Health Science Center at Tyler | Tiya Johnson | Y |
| 24 | The University of Texas Health Science Center at Tyler | Brittney Nichols, MBA, LPC-S | Y |
| 25 | The University of Texas Southwestern Medical Center | Carol Tamminga, MD | N |
| 26 | The University of Texas Southwestern Medical Center | Hicham Ibrahim, MD | Y |
| 27 | Health and Human Services Commission - mental health care services | Sonja Gaines, MBA | Y |
| 28 | Health and Human Services Commission - mental health facilities | Scott Schalchlin | N |
| 29 | Texas Higher Education Coordinating Board | Elizabeth Mayer | N |
| 30 | Hospital System | Danielle Wesley | Y |
| 31 | Non-profit - Meadows Policy Institute | Andy Keller, PhD | N |
| 32 | Non-profit - Hogg Foundation | Octavio Martinez, Jr., MPH, MD | Y |
| 33 | Non-profit - Texas Mental Health Counsel | Danette Castle | Y |
| 34 | Administrative Contract – University of Texas System | David Lakey, MD | Y |
| 35 |  |  |  |