Convening of the Texas Child Mental Health Care Consortium (TCMHCC)
February 6, 2023
10:00 AM – 3:00 PM
University of Texas System Administration
210 West 7th Street, 2nd Floor Board Room
Austin, TX 78701

Minutes

The Texas Child Mental Health Care Consortium (TCMHCC) will convene a videoconference meeting pursuant to Texas Government Code Section 551.127 on February 6, 2023, according to the following agenda. The Chairperson, Dr. David Lakey, will be present, and will preside over the meetings, at the posted location.

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

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

-29 executive committee members were in attendance. See attendance report for full list of attendees.

II.   **Review and approve the following item.**

a. Minutes from the December 13, 2022, executive committee meeting.

→ **Dr. Podawiltz made a motion to approve the minutes. Dr. Wagner seconded. Motion to approve the minutes approved.**

III.   **Information and discussion on budget items associated with implementation of TCMHCC initiatives set forth by the 87th Texas legislature, 3rd Special Session in Senate Bill 8 appropriating federal American Rescue Plan Act (ARPA) funds for the purposes described below. The full Executive Committee will review, receive and/or provide information and take appropriate action.**

a. **Fiscal Agent – The University of Texas at Austin**
       - Linda Haster presented an update as the fiscal agent.
   • Pie graph showing expenditures through December 2022 was shown
   • Reimbursements for the initiatives included over $1.1 million for CPAN, over $1.3 million for TCHATT, and over $111,000 for CPWE
   • A detailed sheet of reimbursements by initiative was shown
       o Dr. Pliszka asked for clarification of the cutoff for funds. Linda responded that the LBB approved funding through November 7th, 2023 and approval to extend the funds would be required by the LBB if desired due to delays in the contracts process.

b. **Overall Administration – The University of Texas System**

- Lashelle Inman provided a verbal update.
- Monthly status reports continue to be submitted from each HRI
- Financials are being assessed for projected spend
- Jonathan is reviewing last year's fiscal spending

- Sarah McLaughlin provided the first quarter review of ARPA project metrics

- Funding start date Sept 1st
- Each HRI will have a detailed PowerBI report with their project trajectory by Friday
- Metrics for all ARPA funded projects was shown for CPAN, TCHATT, CPWE, & CAP expansions
- Sarah reviewed risks and actions for the ARPA projects including pending contracts, outreach, technology, privacy, staffing, and referrals
- Common issue is staffing, hiring and recruiting

c. **Perinatal Psychiatric Access Network – Texas Tech University Health Science Center**
    - See COSH, CPAN presentation
d. **Collaborative Care – Meadows Mental Health Policy Institute**
    -Dr. Talebi provided an update
- 42,415 individuals reached
- 7 health systems committed
- 1 year goal is 9 health systems, and the 2 year goal is 18
- Had one-on-one HRI meetings in January
- Completed Pediatric Collaborative Care Roundtable
- Implementation timeline was shown

e. **Substance Use Disorder Program – The University of Texas Health Science Center San Antonio**
    -Dr. Blader presented a verbal update on the SUD program.
- all 4 participant sites are operational and seeing patients
- 60+ referrals to this date
- Working to grow referral base from schools
- Working on a uniform clinical monitoring outcome metric
- Thinking of how to contribute to safety issues around fentanyl and counterfeit prescription medications
f. **Youth Aware of Mental Health – The University of Texas Southwestern Medical Center**
    -Dr. Trivedi provided an update on YAM
- 150 instructors trained across the state
- Total school districts engaged was shown
- Each HRI now has MOUs and engagement with each of the listed schools
- Projected total YAM student reach is 10,000 by end of 2022-2023 school year
- Projected total YAM student classes is 750 by end of 2022-2023 school year

- Evaluations completed by month was shown
- Grade level student reach was shown using pie graphs. Most students were 9th graders
- Graph showing mental health literacy improvements was shown
- Pie graphs showing depression and anxiety symptoms from PHQ-2 were shown
- Plans to expand participation from 8 to 12 nodes and expand the Wellness Ambassador Program to train non-mental health professionals in schools

g. **Safe Alternatives for Teens and Youth – Baylor College of Medicine**

- Dr. Williams provided a verbal update on Safety-A

- Dr. Pinciotti has been working with participating teams to identify providers
- IRB process is complete
- 3 cohorts of training scheduled for February, March, and April
- Working to have the HRIs become trainers in Safety-A

- Sarah McLaughlin provided an update on ARPA metrics. See III b.

- Dr. Lakey introduced Dr. Goodkin from UTRGV. He is replacing Michael Patriarca as a member of the executive committee.

IV. **Presentation and discussion on proposed expansion of research projects described below. The full Executive Committee will review, receive and/or provide information and take appropriate action.**

a. **Youth Depression and Suicide Research Network**
    - Dr. Trivedi presented an update
    - 8,562 total visits have been completed
    - 502 people have competed their year 1 visit
    - Research data completion rate was shown
    - 71% completion rate at the 12 month follow up visit
    - Data at study entry was shown
    - Social media use among YDSRN youth was shown
    - 5 manuscripts are currently under review
    - 22 manuscripts are in development
    - Next steps include improving remission rates for youth in network and enhancing the functioning of learning health network
    - Node budget consideration of $650k across 2 years
        o Dr. Pliszka inquired about how have they addressed the issue of flexibility in scheduling. Dr. Trivedi responded that all visits expect the first can be virtual visits and some visits they try to capture immediately after school is out for the day.

b. **Childhood Trauma Research Network**
    -Dr. Nemeroff provided an update

- Cumulative enrollment and visits was shown. Enrollment differs across sites as capacity differs across sites.
- Hoping to follow participants for 2 years
- Participant retention was shown with 35% of participant retention at 2 years
- Primary diagnoses at baseline was shown with 27% had PTSD
- Worst Criterion A trauma was shown with the top 3 including accident, family/friend dying, and sexual abuse
  - Danette Castle reminded everyone to use the term "engaging" versus "recruiting" and "participants" versus "subjects" due to the nature of the research.
- CTRN manuscript titles were shown
- First publication has been submitted
- 2 CTRN derivative studies were highlighted
- Plans for the next biennium were shared to include training all 12 HRIs in trauma-focused cognitive behavior therapy
- Dr. Newport came up with 3 tiers of HRIs to help determine stipend distribution. UT Austin Dell Medical School and UT Health Houston had the most successful enrollment and retention from the previous 12 months
- All of the nodes will receive more funding compared to the previous biennium
- Tiered node budgets were shown
  - Dr. Newport added that the slides show primary diagnoses and types of trauma. Actual number of kids who met criteria for major depressive disorder was higher than 18% while the traumas listed were the worst that were identified during the interviews. He added that on average, kids experience 3-4 traumatic events over the course of their lives.
  - Dr. Tamminga inquired if any family therapy is offered for the family associated traumas. Dr. Nemeroff responded, therapy is not a component of this project but they are referred out.

c. **Other research related proposals not affiliated with (a) or (b)**

   - Dr. Lakey discussed next steps for research including funding other projects with junior investigators, a peer review process with an out-of-state committee, and collaboration between the institutions

V. **Updates on the following TCMHCC initiatives. The full Executive Committee, and UT System TCMHCC team members will provide information.**

   a. **Status of expansion of the Texas Child Health Access Through Telemedicine (TCHATT).**

      - Dr. Lakey provided an update on the expansion of TCHATT
      - Given the direction to expand into every school that wants the program
      - Providing data every month to the governor's office
      - 2.6 million kids covered in the state
      - 48% of student body in the state of Texas covered
      - Biggest challenge has been staffing

- Luanne Southern added insight about TCHATT expansion

- Workforce recruitment and retention is a challenge
- Keep track of reasons why schools decline the service

- Lashelle Inman shared slides from the TCHATT governors report to show onboarding versus planned statuses by each HRI. She also showed the list of reasons a campus has declined the service. Lashelle emphasized that teams submit any issues in the monthly status reports

- Dr. Pliszka added that sometimes the schools do not move forward with the MOU and it's difficult to determine when a district can be considered officially declined after a number of outreach attempts. Julie Wayman added that she can help reach out to some schools that are nonresponsive.

- Brittney Nichols added that UT Tyler Health Science Center has applicants coming from school districts as they recruit new mental health providers to staff. A district wanted a contract that they couldn't take their therapists as it made them short staffed. Dr. Lakey added that this is each person's personal choice as we continue to develop the mental health workforce.

b. **Update on the number of 2023 Child and Adolescent Psychiatry Fellowship matches within Texas Health Related Institutions participating in the Child and Adolescent Psychiatry Fellowship initiative.**
   - Updates from the HRIs below:
     - Dr. Nemeroff, UT Austin Dell Medical School – filled all slots; probably could've expanded; most were from outside of Texas
     - Dr. Podawiltz, UNT Health Science Center – first year, filled all slots
     - Dr. Babatope, UT Health Houston – filled all slots
     - Dr. Williams, Baylor College of Medicine – filled all slots
     - Dr. Wakefied, TTUHSC – have 1 slot remaining; currently interviewing
     - Dr. Martin, TTUHSC EP – all slots filled internally
     - Dr. Pliszka, UT Health San Antonio – filled all slots
     - Dr. Tamminga, UTSW – filled all slots; 4 slots open for triple board residency
     - Dr. Johnson, UT Tyler HSC – 2nd match, 1 slot filled through match, other slot filled outside of match

c. **Child Psychiatry Access Network (CPAN) site visit report.**
   - Lashelle Inman presented the CPAN site visit report
     - Point in time observations from spring 2022 to current
     - Structure for the site visits included documentation requests, staff surveys, financial reports, in-person interviews, review of metrics and more.
   - Outreach & enrollment - HRIs varied with printed materials and outreach strategies

- Assigning regions to staff for outreach, setting a regular cadence for activities, and leveraging psychiatrists for outreach was most effective across the teams
- It was challenging to get past front office gate keepers to connect with providers and to reach rural areas and determine providers to target for outreach
- Provider Training & Education - HRIs have lots of educational material that needs to be promoted and easily accessible on the consortium website while project ECHO experiences varied across HRIs
- Program Operations - Further evaluation is needed to determine most cost-effective team structure. Teams with the highest retention had the most remote workers
- Technology supporting CPAN - Want user groups in place and improve communication around technology changes in the pipeline
- Areas for improvement for the next year include standardizing communications, website revamp, PCP target lists, monthly dashboard all HRIs can access, internal communications and more.

VI. **Presentation 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 the Health-Related Institutions relating to the Child Psychiatry Access Network (CPAN), Texas Child Health Access Through Telemedicine (TCHATT), the Child Psychiatry Workforce Expansion (CPWE), and the Data Management and Governance Committee. 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**

-Dr. Williams presented an update including CPAN and TCHATT. See corresponding sections below.

b. **CPWE**
   - No update provided at this time
c. **CPAN**
   - Direct Consultations
     - Teams are currently staffed to manage direct consultations
     - Pilot regions saw an increase in consultation volume
     - Positive feedback from PCPs
     - Recommendations from CPAN Leadership were discussed including using a sister hub to cover if the regional hub does not have the infrastructure

       - Dr. Podawiltz inquired about a solution to register providers in Epic for using telehealth. Dr. Williams provided the steps necessary to register a nonbillable clinic in Epic.

       - Dr. Trivedi inquired if there have been issues sending the patient back to the PCP. Dr. Williams responded that they make it clear in the

beginning that they will send the patient back to the PCP if they can manage.

- Dr. Lakey inquired if anyone was strongly opposed to the idea of sister hub coverage when needed. Dr. Pliszka added that all HRIs have the funding to do it so wouldn't be fair to push the direct consult to another HRI. Lashelle provided insight that some HRIs are providing direct consults without ARPA funding due to having the staff.

→ Dr. Tamminga made a motion to approve CPAN Leadership recommendations around Direct Consultations. Dr. Wakefield seconded. Motion approved.

- o CPAN growth in consultation volume was shown.
- o CPAN Trayt dashboard was shown
- o Almost 10,000 providers enrolled; Not physician exclusive
- o Almost 17,000 consultations; will hit that number next month
- o Over 15,000 patients have been served
- o Teams accommodate when the physician can take the call back but we still track the 30 minute call back metric
- o January consultations totaled over 1016, the highest to date
  - ▪ PeriPAN
    - Dr. Wakefield provided an update on PeriPAN
    - 38% enrollment across the pilot sites
    - Seeing an increase in multiple calls
    - Launching an educational series to coordinate educational efforts across HRIs monthly every 3rd Tuesday
    - Will be offering ECHOS in addition to these webinars
    - Internal monthly newsletter launched in January 2023 to the pilot sites
    - For direct consultations, 2 sites are going live while the other 2 are working on implementation

d. **TCHATT**
   -Dr. Williams provided an update
   - TCHATT referrals per academic year were shown with an increase in number of referrals
   - TCHATT sessions per month were shown with an increase in sessions compared to last school year
   - Close to 50% covered lives

e. **Data Management and Governance Committee**
   -Dr. Pliszka presented an update on preliminary outcome data on impact of TCHATT on depression scores
   - Looking at developing outcome data for TCHATT patients
   - Population involved TCHATT students who took the PHQ-9A more than once

- Looking at within-student change
- 509 students with repeated PHQ-9A
- Mean score change was shown to show that all race and ethnic groups improved equally well and all age and gender groups improved equally well
- Similar results across females and males and various age groups
- Students in all school locales improved equally well
- For those students who had mild or moderate degrees of depression, they had a decline in depressive symptoms
- Preliminary data shows that TCHATT participation resulted in a reduction in depressive symptoms
- Further analysis planned to look at anxiety, suicidal behavior and other major symptom groups
  - Dr. Trivedi inquired how to reflect the full population using the 509 students. Dr. Pliszka responded that therapists would have to obtain the instruments from the patients and make sure families participate by completing the assessments, make it user friendly, and help families see the benefit.

VII. **Update on the 88th Texas legislative session, including information about introduced Bills associated with the TCMHCC, and other introduced Bills relevant to children's mental health. Executive Committee members may discuss and provide information.**

  -Sean Griffin provided insight on legislative session
- Currently on day 28 out of 140
- Biggest point of work right now is budget
- Lots of other recipients of ARPA that are in the same situation as us
- Continue to engage with the legislature to give them the information they need
- A few bills will touch upon the consortium's work
- Tracking Senate Bill 113; It would allow school districts to partner with LMHAs to provide services and would require HHSC to enroll schools
- Also tracking HB 1157; Would allow students to get an excused absence for mental health treatment
- SB 245 – Would emphasize parental consent; Additionally, every enrolled school district would have to enroll every campus within their district so every student can have the service available
- Lot of focus on mental health care
- Sean provided a rundown of month-to-month expectations during legislative session

VIII. **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.**

IX. **Adjournment**

Next meeting will be held on March 20, 2023.

Attendance List

#	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	Y
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	Y
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	Y
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	Karl Goodkin, MD, PhD	Y
23	The University of Texas Health Science Center at Tyler	Tiya Johnson, MD	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	Y
26	The University of Texas Southwestern Medical Center	Hicham Ibrahim, MD	N
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	Y
30	Hospital System	Danielle Wesley	Y
31	Non-profit - Meadows Policy Institute	Andy Keller, PhD	Y
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			