

HEART OF TEXAS REGION MHMR CENTER LOCAL PLAN 2006 - 2007

VISION STATEMENT

The purpose of the Heart of Texas Region Mental Health Mental Retardation Center (HOTRMHMR) is to provide residents who have a diagnosis of mental illness, mental retardation, developmental delay and/or emotional conflict, the opportunity to live as useful and productive lives as possible and to develop their respective mental capacities to the fullest extent. Toward this end, HOTRMHMR provides services to eligible persons who live in the local service area: Bosque County, Falls County, Freestone County, Hill County, Limestone County and McLennan County.

MISSION STATEMENT

In 2002, the HOTRMHMR mission statement was revised with the participation of staff, consumers and stakeholders:

The Heart of Texas Region Mental Health Mental Retardation Center strives to deliver accessible, caring and responsive support services to individuals and families coping with mental illness, mental retardation, developmental delays and emotional conflict.

HISTORY AND ORGANIZATIONAL OVERVIEW

In 1965, the State of Texas passed legislation establishing the Texas Department of Mental Health and Mental Retardation (TDMHMR) and authorized the creation of a local Board of Trustees. In 1967, the original Board of Trustees for HOTRMHMR was sworn in under the sponsorship of McLennan County, the City of Waco, and the Waco Independent School District. The Board initially contracted with a team of mental health professionals at Baylor University to develop a comprehensive plan for mental health services in McLennan County. Additional funds were secured that enabled Providence Hospital to develop an Inpatient and Outpatient mental health facility. Later, the Board itself applied for staffing grants to provide the human resources necessary to implement services in McLennan County.

In 1973, under the direction of TDMHMR, the Board of Trustees initiated efforts to develop services for five remaining counties in the Heart of Texas Council of Government region. Bosque County, Hill County and Limestone County became Center sponsors as well. (Currently, the City of Waco and Waco ISD are not Center sponsors.) The Center provided services for persons with mental retardation in McLennan, Bosque and Hill Counties in accordance with the state contract. The state provided mental retardation services through the Mexia State School in Falls, Freestone and Limestone Counties until 1998 when the state transferred all of the state school community operations to local MHMR Centers. HOTRMHMR is currently both the mental health authority and the mental retardation authority for all six counties in the HOTCOG

region. State legislation in 2002 realigned state departments and TDMHMR no longer exists. Currently, the Center contracts with the Department of State Health Services to provide mental health services, the Department of Assistive and Rehabilitation Services to provide mental retardation services, and the Department of Aging and Disabilities to provide early childhood intervention services.

The Heart of Texas Region MHMR Center has a nine member Board of Trustees. The Trustees are appointed by Center sponsors, are representative of the community and are diverse in composition. The Board has many planning functions including policy development, oversight of fiscal planning and fiscal performance, and oversight of agency performance and compliance with the state contracts. The Board meets on a monthly basis to review and act on reports regarding finances, programming, state initiatives, state funding, contract compliance and planning.

ASSESSMENTS

With an organization of 300 employees that serve 10,000 consumers annually, there are many opportunities for assessment and evaluation. Assessments are an on-going process used to review the Center's performance and to make needed improvements. Internal assessments include monthly financial reports made to the Board of Trustees, Utilization Management Committee data analysis, Quality Management processes and ad hoc assessments. Typically, feedback and findings from assessments result in the formation of a work group to resolve any problems or to make recommended improvements. External assessments include both site visits from state officials and those reviews specified in the performance contract with the state. External assessments include, but certainly are not limited to, Fidelity Reviews, quarterly Encounter-Medicaid reviews, Focused Reviews (such as NGM or crisis services), HCS audits, Texas Home Living and Authority reviews, ICF/MR audits, and financial audits. In addition to assessments concerning agency services, HOTRMHMR frequently participates in community initiatives and assessments in a cooperative effort to enhance the quality of life for our consumers.

COMMUNITY PARTICIPATION

Mental Health Services

HOTRMHMR has a long-standing and positive relationship with county governments and with the law enforcement entities in each county. The director for the Center's regional services routinely participates in the HOTCOG Community Planning Meetings for each county. In this past two years, with the state hospitals diverting admissions, Center staff have met periodically with these representatives to address the problems of increased demand for emergency services and to plan for contingencies when the state hospitals are on divert. Some of those meetings from the past year include:

- In May of 2005, the Executive Director and HOTRMHMR staff met with the Hill County Judge and Sheriff's Department regarding jail diversion and mental health

services. Also in May, a meeting was held with the Bosque County Judge and representatives of the Bosque County Sheriff's Department. Since that time, the Center developed an additional position to conduct jail diversion services in the five counties besides McLennan County.

- Center staff continue to lead the Jail Diversion Task Force which meets regularly to develop methods of diverting persons with mental health crises from the jails in the six county region.
- In May of 2005, the Executive Director met with the McLennan County Sheriff Department and also the Waco Police Department to discuss mental health needs and priorities in relation to law enforcement. A subsequent meeting with law enforcement representatives from the six county area identified crisis intervention training as a primary need. As a result, the Center planned two-tiered mental health training for all law enforcement officers in the six county catchment area. Approximately 1000 officers received basic instruction in de-escalating emergency mental health situations. The McLennan County Sheriff's Department provided additional advanced CIT training to selected officers in the March of 2006.
- In May of 2005, the Executive Director, HOTRMHMR staff from Psychiatric Services and directors from DePaul met regarding contract issues, capacity issues and to identify long range plan needs.
- In May of 2005, the Executive Director made a presentation to Waco's Leadership Forum and solicited input regarding local services.
- In May of 2005, the Executive Director met with the leaders of Mission Waco, a local organization that serves persons in poverty and persons who are homeless to gather input regarding local services.
- In May of 2005, the Executive Director made a presentation to the McLennan County Commissioner's Court and solicited input regarding ongoing planning and information exchange.
- In this fiscal year, the director of the Center's after hours emergency services participated as a member of Waco's recently formed Homeless Coalition which is working on a HUD grant to provide single occupancy residences for homeless persons. In addition, this director serves on the Mayor's Health subcommittee to develop a ten-year plan to end homelessness. In the city of Waco, two facilities that service the homeless population specifically have opened within blocks of the main Center.
- Independence House, a shared agreement, joint venture between the Waco VA and HOTRMHMR, opened in May of 2005 and celebrated its one year anniversary in April of 2006. Planning for this peer-to-peer recovery assistance program actually began in January of 2005 through conversations between the PNAC members, NAMI representatives and HOTRMHMR staff. The program is consumer led by a sixteen member board composed of HOTRMHMR consumers and VA consumers. The program offers peer support and is initiating several recovery based groups. HOTRMHMR provides a facility and the Center and the VA jointly supply staff in support roles.
- Center staff meet with and give presentations to community organizations often. In this fiscal year, presentations were made to the Waco chapter of NAMI, the adult probation department, Waco Leadership Forum, and the VA Regional Center.

- Center staff continue to meet with the Suicide Prevention Coalition formed last year in Waco. This group seeks collaborative methods by which suicide prevention is addressed in community agencies.
- In response to the Hurricane Katrina and Hurricane Rita crises, Center staff participated in disaster relief services. Waco was designated as a special needs Center in the wake of these storms and provided hours of manpower and mental health services to assist evacuees placed in shelters in Waco.
- Center staff are currently participating, along with many community agencies, in disaster preparedness training. In May of 2006, the Center participated with the state in a disaster drill that emulated the response and relief efforts to a hurricane.

HOTRMHMR staff serve on the boards of other community agencies and organizations that involve mental health. Our participation in the community includes:

- Membership in the Heart of Texas Council of Government Criminal Justice Advisory Board
- Board of Trustees of the Freeman Center (chemical dependency program)
- CRCG's for child and adolescent services in all six counties
- Community Public Health District and AIDS Advisory Board
- Heart of Texas Suicide Prevention Coalition
- Committee to Save the Waco VA Hospital
- Participation in the Homeless Coalition and the Mayor's Ten Year Plan for the Homeless
- Participation in the Nonprofit Network, a local organization of community agencies formed for the purpose of information sharing.
- Advisory Board for the University of Mary Hardin Baylor School of Social Work
- Advisory Board for the Bill Logue Juvenile Justice Center
- Salvation Army Community Relations Board
- DARE Board of Trustees
- McLennan Community College Advisory Board for MH Education
- TSTC Advisory Board for Community Development
- McLennan County Youth Collaboration Board
- McLennan Community College Advisory Committee for Child Development
- CCMS Advisory Board
- United Way Loaned Executive/ Executive Management

Mental Retardation Services

HOTRMHMR has increased its networking with area providers as well as conducting outreach into our communities. Included in those efforts are:

- Quarterly Consumer-Parent informational and resource meetings in the Waco and Mexia areas. The director of Developmental Services routinely sets up open meetings to inform consumers and family members of trends in service delivery, legislative actions that affect services and of Center activities.
- Staff regularly attend quarterly Continuity of Services meeting with area state schools, private and public providers, and other Regional Centers to problem-solve issues with placement services.

- The Center for Developmental Services developed and implemented a staff motivation and incentive program in March of 2004, titled "Make It Happen." This program has improved employee attitudes and led to a more cohesive team.
- In response to the Hurricane Katrina and Hurricane Rita crises, Center staff participated in disaster relief services for persons with mental retardation. Waco was designated as a special needs Center in the wake of these storms and provided coverage and coordination for group home evacuees placed in shelters in Waco.
- For the seventeenth year, HOTI was a major partner in the Annual Fishing Event for Special People. Over 3000 people from the greater central Texas area either volunteered or participated in this one day event in which consumers and other persons with special needs fish in an indoor tank stocked with trout.
- Center staff worked with the local Special Olympics to recruit and coordinate volunteers.
- The Volunteer Coordinator works with Baylor University to assign student volunteers in Baylor's student outreach program to programs at HOTRMHMR. In addition, McLennan Community College student volunteers work through the volunteer coordinator.
- HOTI routinely hosts tours of educators involved in transitioning activities in numerous schools in the catchment area. HOTI also participates in a year-round transitioning program through a contract with Waco ISD. Consumers in the Day Habilitation Program at HOTI volunteer weekly with Meals on Wheels.
- HOTI provides space for periodic United Way and Arc meetings. The Program Director for HOTI, received the Builder's Award from the Masonic Lodge, Baylor in May of 2005 for his participation in building up the Waco community.
- Beginning in August of 2005, the Division Director of Developmental Services joined regional public transportation providers, HOTCOG employees and Independent Living Centers personnel in developing a regional transportation plan to address transportation needs for rural, elderly and disabled people. These meetings will continue until a plan is submitted September 1, 2006.
- On September 12, 2005, the Division Director of Developmental Services and the Authority Program Manager presented the array of services provided by DADS to the Support Group for Parents with Children with Autism. They also solicited specific service needs and identified gaps in services to people diagnosed with Autism.
- The Division Director of Developmental Services and a Case Worker attended the Midway ISD School Board meeting September 20, 2005, in support of a specific need for a consumer and to discuss general services we provide that compliment and are in conjunction with school services.
- Developmental Services was represented in Board Meetings for the Arc of McLennan County through December of 2005. Specific projects between the Arc and Developmental Services include expanding Arc participation in money management and developing a summer camp program for children with Autism.
- On December 5, 2005, the Division Director of Developmental Services and the Program Manager for Authority Services hosted and participated in a local meeting to discuss current service gaps for children and adults with Autism, with the intention of submitting results for inclusion in the revised State Autism Plan. Anita Karney,

representing the Waco-Killeen-Temple Region for the Autism Plan coordinated the discussion.

- On February 5, 2006, the initial meeting with Gary Luft, Director of Health and Human Services at the HOTCOG occurred. This was followed up in March with a combined information-sharing meeting between MR staff and AAA/HOTCOG personnel at Developmental Services. The intent was to get a better idea of the services provided by each agency.
- The Division Director of Developmental Services, the Authority Program Manager, and a PNAC Committee member participated in a Transition Planning Seminar at the Region XII Education Service Center March 24, 2006, along with Special Education Teachers and Vocational Adjustment Coordinators from area school districts.
- On May 3, 2006, the Division Director of Developmental Services met with Dr. Helen Benedict at Baylor University to discuss collaboration with a program developed specifically to target respite and community inclusion activities for young children diagnosed with Autism and/or their parents. Dr. Benedict indicated she could provide autism-specific training to staff.
- On May 10-12, 2006, HOTRMHMR collaborated with Central Counties Center for MHMR Services and Brazos Valley MHMR Center in a Train the Trainer workshop presented by Linda LaPointe, a consultant from Rye, Colorado who facilitates staff training in direct care services.
- Early Childhood Intervention staff participated in the Smart Start Child Care Association which provides training to day care staff.
- In the past year, Early Childhood Intervention staff provided training on the use of a developmental checklist to physicians at the Family Practice Center.

HOTRMHMR Staff serve on the boards of other community agencies and organizations that involve mental retardation. Our participation in the community includes:

- CRCG (McLennan, Falls, Limestone/Freestone, Hill)
- Board of Directors, Arc of McLennan County
- Downtown Waco, Inc.
- Mayor's Committee for Persons with Disabilities
- Waco Recycling
- Parent Connection, Autism Parent Support Group
- Board Chair for the McLennan County Youth Collaboration
- Participation in the Waco Leadership Forum
- Region XII Education Service Center Special Education Directors meetings

Community Involvement

Heart of Texas Region MHMR Center has collaborative relationships with the following organizations:

- Sheriff's Departments and Police Departments
- Family Practice Center
- DePaul Hospital
- Adult Probation
- Adult & Child Protective Service
- Juvenile Probation/Detention
- United Way Agencies & Programs
- Hospitals in Region
- Waco Housing Authority
- McLennan Co. Youth Collaboration
- Freeman Center (SA)
- Baylor University
- State Schools
- Austin State Hospital
- ARC
- NAMI
- The Veterans Administration
- Independent School Districts
- McLennan Community College
- Area Colleges and Universities
- Heart of Texas Council of Government
- Local Municipalities

PLANNING AND NETWORK ADVISORY COMMITTEE

The Planning and Network Advisory Committee (PNAC) at HOTRMHMR is composed of eleven members who are consumers, family members of consumers and stakeholders. The PNAC meets monthly to review Center programs, to become informed about state directives, and to provide input to Center planning. The PNAC reports to the HOTRMHMR Board of Trustees quarterly.

In September of 2005, at the beginning of the 2006 fiscal year, the PNAC revisited its goals and outcomes. For the 2006 fiscal year, the PNAC determined to focus on:

1. Establish a group to look at how to maximize Heart of Texas Industry (vocational) services.
2. Collaborate with McLennan County Arc on the summer autism camp, money management, and HOTI.
3. Support the efforts of each particular interest in the PNAC, building relationships within the PNAC and effectively use community networks to communicate about the services provided to our consumers.
4. Develop and implement an outcome based assessment that lends itself to cost analysis techniques.
5. Recognize barriers and develop a plan of action to facilitate transition plans of children into adulthood.
6. Explore the demographics of those being served to determine if there are any groups being underserved.
7. Develop integrated services, i.e., physical health, mental health and drug abuse treatment, for individuals in the Center's six-county area.
8. Encourage opportunities for using self-determination processes for mental retardation consumers.

Two quite significant developments occurred this fiscal year as a result of the work of the PNAC. The first was the opening of the Independence House, a peer-to-peer recovery based program jointly operated by HOTRMHMR and the Waco Veterans Administration. The second was the formation of a community task force to address improving programming at Heart of Texas Industries. Both of these developments are discussed at length in other sections of the Local Plan Supplement.

HOTRMHMR CENTER DEMOGRAPHICS

Total People Served in FY05

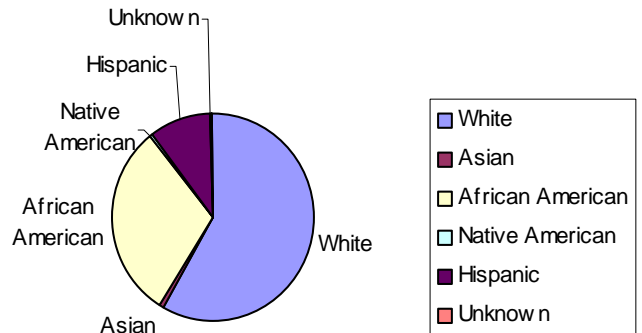
Adult Mental Health Services	4,159
Child & Adolescent Services	568
Mental Retardation Services	768
Early Childhood Intervention	803

Emergency & Psychiatric Information

3,797	Crisis Calls/Screening
744	Local Hospital Admissions (Excluding Evaluation Center)

***Registered Consumers
Annual Income***

1,474	\$0 - \$6,620
1,293	\$6,621 - \$11,140
383	\$11,141 - \$15,660
172	\$15,661 - \$20,180
257	\$20,181+



HOTRMHMR CENTER SERVICES

Benefit Eligibility Assistance

Center-wide, six staff assist consumers in filing applications for Medicaid and other third party assistance. In FY05, a total of 2,506 consumers were assisted Center-wide.

Mental Health Admissions

Staffed by three master's level clinicians in McLennan County, this unit provides crisis services, screening, evaluation, and support for individuals seeking services. Each county office is staffed with a master's level clinician or a Qualified Mental Health Professional to provide crisis services, screening, evaluation and support for individuals seeking services.

After Hours Emergency Services

Accessible in all six counties, the Emergency Services unit provides mental health crisis screening and assessment when HOTRMHMR offices are closed. Three master's level clinicians coordinate with Center psychiatrists, local hospital emergency rooms, law enforcement, and the DePaul Center for Psychiatry to ensure client safety.

Mental Health Case Management

Planning, coordination, and monitoring of services are provided at least monthly for all admitted clients of the Center by bachelor's level staff. Case Management services are available in all six counties covered by HOTRMHMR. A total of 873 were served in FY05.

Psychiatric Services Division

Staffed by three psychiatrists, a consulting psychiatrist, a nurse practitioner, and two nurses, this unit served 1,758 clients in FY05 as well as treating 744 admissions to the DePaul Center, excluding the Evaluation Center. MHMR psychiatrists served 493 individuals in the Evaluation Center. Psychiatric Services extend to all six counties covered by HOTRMHMR.

Mental Health Outpatient Unit

This unit, staffed by three licensed master's level staff provides, cognitive behavioral therapy, therapeutic counseling and skills training for adults with severe and persistent mental disorders. Each regional office is staffed by either a master's level clinician or a Qualified Mental Health Professional with supervision from a Ph.D. Psychologist. This unit served a total of 700 individuals in FY05.

Pharmacy Services

A full time licensed pharmacist operating an in-house pharmacy, works closely with medical staff to provide medication to non-Medicaid consumers. An average of 1,798 prescriptions are filled per month. This division also operates a Pharmacy Assistance program averaging approximately \$50,000 in assistance per month.

Assertive Community Treatment

This mobile unit supports individuals with the most severe and persistent mental illness by providing intensive treatment, rehabilitation and support services at consumer's homes and other community settings. In FY05, a total of 52 individuals were served.

Independence Program

Begun in May of 2005, the Independence Program is a joint project between the Veterans Administration and MHMR. The goal of the Independence Program is to provide consumers of mental health services in the Central Texas area the opportunity to help one another through the use of peer support programs. This program currently serves approximately 50 individuals each day.

Supported Housing

Intensive support and rehabilitation training is provided for those consumers who need assistance in obtaining and maintaining community housing. Consumers live in apartments and homes throughout the area. Some individuals reside in The Dean Maberry Center, formerly called the Phoenix Apartments. In collaboration with Waco Housing, MHMR jointly facilitates operation of 23 HUD apartments. In FY05, approximately 51 individuals received some type of supported housing assistance.

Urgent Care Center

This unit, new in FY06, provides intensive treatment services to admitted MHMR consumers who are in a crisis and need additional support services to avoid inpatient hospitalization or reduce the time spent in the hospital. Center staff provides individual and group therapy as well as psychosocial rehabilitation training and case management services. Nursing and physical services are also available as needed.

TX Correctional Office on Offenders with Medical or Mental Impairments (TCOOMMI)

This unit provides screening and referral to inmates with mental health needs prior to parole from area prisons. TCOOMMI also provides service coordination and rehabilitation services to individuals currently on parole or probation upon referral from the Texas Department of Criminal Justice. In FY05, this unit served 931 individuals. The unit also provides similar services to juveniles with mental health needs and involved with the legal system.

Klaras Children's Center

This unit, staffed with early childhood specialists and licensed therapists, serves children, ages birth through three years, who are developmentally delayed or at risk for delay. Services are primarily delivered in "natural environments" such as the child's home or day care setting. During FY05, 803 children received services throughout the year.

Klaras Center for Families

Children and adolescents ages three through seventeen years who evidence significant emotional or behavioral problems receive outpatient cognitive behavioral therapy, counseling, emergency and psychiatric services in this unit. Family members also receive intervention. This program also works closely with Juvenile Justice and provides intensive services to individuals in coordination with Juvenile Probation. In FY05, 561 individuals were served. This program is staffed by a combination of licensed master's level staff and bachelor's level workers.

Center for Developmental Services (CDS) Admissions

This intake unit provides screening, evaluation and crisis services for persons seeking mental retardation services from HOTRMHMR.

CDS Service Coordination

This unit provides planning, coordination, and monitoring of services at least monthly for all admitted clients of the Center by bachelor's level staff. A total of 364 were served in FY05.

Home and Community Based Services (HCS)

This CDS unit provides specialized Medicaid waiver services to people with mental retardation in their home, foster home, or 4-bed group homes. In FY05, 176 individuals were served.

Texas Home Living

This CDS unit provides specialized Medicaid waiver services to people with mental retardation. It is a separate funding source from HCS. In FY05, 110 individuals were served.

Supported Living

This CDS unit works closely with other units to provide training, supports such as grocery shopping and money management, and other assistance to individuals living in their own homes or apartments. Assistance is available in all six counties served by HOTRMHMR. In FY05, 103 individuals received services.

Respite Services

Respite services provide families and caregivers with a reprieve from the daily care and supervision of individuals with mental retardation or related conditions. Services are provided on an hourly or daily basis, not to exceed 30 days at a time. Services are available in the consumer's home or in respite facilities operated by the Center. In FY05, 82 individuals were served.

Intermediate Care Facilities (ICF/MR)

These houses provide a home for individuals with mental retardation who are in need of a more structured environment within a community setting. Homes are 6-bed and serve individuals with all levels of mental retardation and related physical needs. In FY05, 40 individuals resided in the residences.

Heart of Texas Industries

This program provides vocational training, supported employment, job placement and specialized day habilitation services to individuals with mental retardation. In FY05, 207 individuals were served in this facility, Hillsboro, and a contract workshop in Mexia. A total of 73 individuals received supported employment services.

PLANNING PROCESS

The Heart of Texas Region MHMR Center has consistently and successfully implemented planning processes since its inception in 1968. Both informal and formal planning takes place on a continuing basis at all levels of the organization through staff meetings, management meetings, case reviews, staff supervision, workgroups, the Network Planning and Advisory Committee, and the Board of Trustees.

Formal planning typically takes place as one fiscal year is concluding and the Center is preparing for the next fiscal year. The Center's performance, community needs, anticipated changes in state contracts, data analysis, budget analysis, and input from stakeholders are considered in the planning process that develops the current strategic initiatives and specific work plans which are based on the current strategic initiatives.

Most on-going planning takes place through workgroups and committees which addresses specific issues in the Center's work plan, or needs that have been identified through data, surveys, interviews, advisory committees, community involvement, client rights, departmental directives and budget issues.

HOTRMHMR values the meaningful participation of consumers, family members, and community stakeholders into the development and improvement of Center programs. Input is gathered in a variety of ways including meeting with stakeholders, surveys, consumer interviews, community collaboration committees, and collaboration with the county judges, family focus groups, provider network meetings, etc. The current president of the local NAMI and the director of the ARC of McLennan County serve on the PNAC.

The over-arching strategic goals initiatives for HOTRMHMR include:

- The Center will provide recovery based mental health services that are efficient, effective, and that maximize the potential and quality of life of the eligible individuals served.
- The Center will provide person directed mental retardation services that are efficient, effective, and that maximize the potential and quality of life for persons with mental retardation or related conditions.
- The Center will provide natural environment based early intervention services to children ages birth to three years who are experiencing developmental delay.

The Local Plan, current strategic initiatives, and the work plan are reviewed annually during formal planning processes. On an ongoing basis, the work plan is reviewed in management meetings with key staff semi-annually. Plans are monitored by the Executive Director, quality management staff and division directors. Additional monitoring is accomplished by committee reports to the Board of Trustees and the PNAC. Work plans are modified and changes are implemented as a result of monitoring throughout the year.

At this time, the Center has identified nine current strategic areas on which to focus:

1. **MH Crisis Services:** The state is engaged in a study of MH crisis services and the Center anticipates changes will be made. Locally, the Center plans to address the issue of the influence of substance abuse on mental health crisis.

2. Community Partners: The Center values its relationships with many community entities and seeks to strengthen relationships with others.
3. Respite Services: The Center needs to develop additional respite services for mental health consumers.
4. Information Services: The Center plans to integrate and combine several computer programs to improve efficiency.
5. Disaster Preparedness: The hurricanes of last year caused the Center to examine its preparation for a disaster situation. While the Center has emergency plans for each facility, a more global approach is needed. In addition, the Center is participating in community planning in order to be of assistance again should other parts of the state evacuate people to the Waco area.
6. Homelessness: The Center continues to participate with community coalitions in the local effort to reduce the impact of homelessness.
7. Performance Contract Outcomes: The Center plans to study the under-represented populations in the catchment area, particularly in the regional area, to determine how to better allocate resources to meet the mental health needs of those consumers.
8. Human Resources: Several HR initiatives are underway to make improvements in HR processes, staff training, and staff retention.
9. Autism: In this growing area of service, the Center plans to explore ways to improve early identification and to provide intervention at earlier ages.

In addition to the strategic areas identified above, the Center maintains its goals to provide quality services its clients and to meet the conditions of the state's performance contract.

STRATEGIC PLANNING CONSIDERATIONS

The Center is required to examine the following areas in setting strategic initiatives.

Criteria for assuring accountability for, cost effectiveness of, and relative value of service delivery options: When considering any initiation of or modification in service delivery or in business operations, the Center holds itself accountable to three basic questions: 1) Is it good for the client, 2) Is it good business for the Center, and 3) does it meet the mission? Since the last submission of the Local Plan, the Center has taken numerous steps to improve the accountability, effectiveness and value of service delivery. Included in the effort to improve was:

- Streamlining new employee training and beginning the process of automating many of the required training elements.
- Continuation of the "No-Show" Clinic on Friday afternoons. Persons who do not show for psychiatric appointments and do not cancel the appointments must attend a no-show clinic for an examination with the psychiatrist and to obtain an order to refill medication prescriptions.
- An additional Caseworker II was added to the Center's jail diversion program to assure that the jail facilities in the six county catchment area are more adequately covered. At present, the two jail diversion staff screen approximately 100 persons each month. Of those 100, about 30 persons are unknown to the MHMR system and are further assessed for mental

illness. Staff collaborate with jail personnel in the care and treatment of those individuals. Increasingly, jail diversion staff are working with the district attorney offices, defense lawyers and judicial representatives regarding sentencing alternatives for individuals with mental illness.

- Implementation of a new Utilization Management/Utilization Review plan and practices, along with new data streams.
- Updating the Center's time keeping system and integrating this system with payroll to allow the Center to hire an employee without duplication of data entry. Additionally, the system will allow employees to review benefits on line, and to change personal information such as phone numbers. In the future, the system will be able to set up reminders to managers regarding due dates of evaluations, employee training, and any other timed event. This system will reduce administrative costs.
- Implementation of a centralized scheduling system in which appointments may be posted on the Center's intranet.
- Like many organizations, energy costs soared and exceeded budgeted expectations this year. After much research and effort, the Center located and contracted with the most economical energy company available. In addition, the Center was able to recognize significant savings by requesting bids for property and casualty insurance, workers compensation insurance and vehicle insurance.
- With 26 facilities, maintenance is a constant task. Most notable from the past year includes paving the parking lot at the Freestone County office, the completion of the expansion at Klaras Center for Families and the relocation of the ACT program.
- The state reduced the number of state hospital bed days allowed for the Center this year. The Center has successfully worked to meet the reduced target and to stay in compliance with the state's performance contract.

To address the need to assure accountability for, cost effectiveness of, and relative value of service delivery options, the Center's Work Plan, based on the current strategic initiatives includes:

1. In a position paper published by DSHS this year, the state addressed the need to integrate services such as primary health care, mental health care and substance abuse treatment. The Center plans to initiate efforts to partner more closely with Family Practice Center to staff to provide training on mental illness.
2. Develop and implement strategies that address the number of local hospitalizations for substance abuse. In the past year, nearly half of the persons admitted to local hospitals experienced a crisis exasperated by substance abuse. The agency plans to form a community wide task force to begin analysis and to create solutions among local entities impacted by this statistic. The goal of this effort is to reduce the number of hospitalizations by increasing or improving local services.
3. The Planning and Network Advisory Committee studied the demographics of the population served by HOTRMHMR in this past year. From this study, the Center plans to review and analyze the under-represented populations using Center services in an effort to improve access.
4. The hurricanes that impacted Texas in 2005 brought to light the need to review the Center's disaster plans to ensure safety for the Center's clients, employees, information systems and facilities. The Center plans to coordinate with the local

emergency officials to develop emergency plans for the Center, and also plans for Center participation in response to community disasters or emergencies.

Goals to minimize the need for state hospitalization and community hospital care:

HOTRMHMR continues to provide crisis intervention services 24 hours per day, 365 days a year, which includes assessment by a mental health professional and local hospitalization when needed. Currently, DSHS is engaged in a “Crisis Re-design” effort that aims to improve mental health crisis services in the state. The Center is also looking at crisis response on the local level.

To address the effort to minimize state hospitalization and community hospital care, the Center’s Work Plan, based on the current strategic initiatives, includes:

1. Development of additional or alternative interventions for persons in crisis prior to admission to the local hospital.
2. Collaboration with the Freeman Center on the availability of substance abuse services for juveniles.
3. Development of additional resources to provide respite services.

Goals to ensure that a consumer with mental retardation is placed in the Least Restrictive Environment appropriate to the person’s care:

HOTRMHMR’s Mental Retardation Services increased the number of service coordinators this past year in order to reduce caseload size and create an atmosphere more conducive to individualized planning. Person Directed Planning procedures are part of the individual planning process for each consumer. In addition, the Center had, for the seventh consecutive year, a zero deficiency HCS audit in FY 2006. The initial Texas Home Living Provider Services audit, February, 2005, also produced zero deficiencies. Two ICF/MR inspections this year also produced zero deficiencies.

To ensure that a consumer with mental retardation is placed in the Least Restrictive Environment, the Center’s Work Plan, based on current strategic initiatives, states the Center will:

1. Provide initial and on-going training for all service coordination staff on philosophy of self-determination and effective advocacy.
2. Add service coordination staff as the need for services increases.
3. Explore the possibility of converting remaining bond homes to HCS and to also secure potential foster care providers.

Opportunities for innovation to ensure that the Local Authority is communicating to all potential and incoming consumers about the availability of services of state school for persons with mental retardation in the local service area of the Local Authority:

Per the contract with the Department of Aging and Disability Services (DADS) the Center staff of Mental Retardation Services assist consumers and potential consumers with the “Identification of Preferences.” Persons requesting residential services are fully informed about residential options, including state school services. Information Item O and Information Item P are completed as directed in the contract with DADS. In addition, staff regularly attend quarterly

Continuity of Services meeting with area state schools, private and public providers, and other Regional Centers to problem-solve issues with placement services.

Goals to divert consumers of services from the criminal justice system:

As discussed above, HOTRMHMR has a long standing and positive relationship with the law enforcement agencies in our catchment area. In October of 2004, the Center conducted a survey with all of the sheriffs' departments to address the problem of wait time in the emergency room. As a result of this survey and jail diversion efforts, numerous meetings to improve and coordinate services were held with law enforcement this year. The Center added a second jail diversion position to serve the regional county jails and detention Centers.

To address the need to divert consumers of services from the criminal justice system, the Center's Work Plan, based on current strategic initiatives, states the Center will:

1. Maintain positive relationships with local law officials and local hospitals.
2. Continue collaborative efforts in crisis resolution training and problem solving.

Goals to ensure that a child with mental illness remains with the child's parent or guardian as appropriate to the child's care:

The Children's Mental Health program at HOTRMHMR is a regular participant in the CRCGs and, in fact, hosts all of those meetings in Waco. Additionally, parent programming focusing on skills training and child development was implemented in the past year. The staff person in the position of Family Partner continues to meet with parents as needed.

Opportunities for innovation in services and service delivery:

When presented with a challenge or an opportunity, HOTRMHMR staff strive to think outside of the box. Since the last submission of the Local Plan, the Center has worked to:

- Collaborate with Arc of McLennan County on a grant to provide a summer day habilitation program specifically for children with Autism. A \$5,000 grant was awarded by the Junior League of Waco for the summer of 2005 program. In the summer of 2004, HOTRMHMR staff collaborated with the Arc of McLennan County to provide behavior and autism training for staff working in regular summer day habilitation program for children with Mental Retardation.
- Provide specific behavior/autism training to Kids and Company anticipating a collaboration with them for an after-school and summer day habilitation program for kids with autism.
- Collaborate with Baylor University, Region XII Educational Service Center, and various school campuses to provide resource information and promote Mental Retardation services.
- Collaborate with Parent Connection, a parent support group, in sponsoring and working a booth for autism awareness at the local mall. Collaborate with Texas State Technical College for the design of an efficient, ADA-compliant respite facility for Mental Retardation services.
- Begin internal pilot for Self-Determination in Mental Retardation services.
- Host two sessions with Michael Walling, expert in Social Security/benefits issues, for Center and other social service agency staff.

- Partnership with the VA for peer activities.

In the Center's continuing effort to enhance our ability to enter, manage, and report the data that represents the Center's activity, the Center developed a data management program: the Clinical And Billing System (CABS). This unique system is the product of several years of development with the intended purpose of replacing the Financial And Clinical Tracking System (FACTS II). CABS was developed internally with the cooperation and interaction of the clinical staff, billing staff, and IT staff, giving the Center the capability to tailor the program to our needs. The system was fully implemented last fiscal year and is used by the clinician and caseworker to enter encounter data, used by the IT department to aggregate and report data, used by directors to analyze data and used by the billing department to charge for services. CABS promotes quicker and easier service entry, better ability to track and review services, better accessibility of client information, more useful reports for supervisors and direct service staff. Some features of CABS include:

- Enhanced user interface: The new system incorporates design elements that are widely used in today's software.
- Real-time monitoring: This allows individual staff to view statistics based on their activity immediately, without having to wait for reports.
- Batch processing: The data that is collected by CABS can easily be translated into batches that can be sent to CARE, rather than manually entering that data.

Although CABS was based on FACTS II, it incorporated several systems that make it stand out over its predecessor. The Uniform Assessment capture system was developed specifically tailored to how the Center does business. As well as the CABS system, a sister system for medication management provides on-screen documentation capabilities for the physician and gives the Center doctors the ability to monitor an individual's medication history. Both systems are under constant revision by our programming staff, allowing them to grow and evolve with the Center's operations. As our business changes, the flexibility of CABS will be a significant factor in our ability to transition smoothly and quickly as challenges present themselves.

Opportunities for innovation in the Center's Work Plan, based on current strategic initiatives include:

1. Integration of the medical data system into CABS.
2. Integration of the Plan of Care and Treatment Plan systems within CABS.
3. Expand the use of wireless technology out of office setting.

Approved by the HOTRMHMR Board of Trustees on 5-24-06.