



# **Report on the Community Mental Health Grant Program**

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**As Required by  
Government Code,  
Section 531.0991(k)**

**Health and Human Services  
Commission**

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**TEXAS**  
Health and Human  
Services

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## Executive Summary

Texas Government Code, Section 531.0991, as added by House Bill (H.B.) 13, 85th Legislature, Regular Session, 2017, directs the Health and Human Services Commission (HHSC) to establish a matching grant program to support community mental health programs. The program's purpose is to ensure individuals with mental health issues can access services and treatment. For the 2018–19 biennium, the Legislature appropriated \$30 million in general revenue for awards to community mental health grant programs<sup>1</sup>.

Grant recipients include local mental health authorities and local behavioral health authorities (LMHAs/LBHAs), non-profit organizations, and government entities that are selected based on set criteria. The legislation requires grantees to dedicate matching funds equal to a certain percentage of the state award based on the population of the counties served. Match funds may include either cash or in-kind contributions but cannot include funds from either state or federal sources. To the extent possible, HHSC shall reserve up to 50 percent of awarded funds for counties with populations of less than 250,000.

HHSC received 74 applications, and initially awarded grants to 56 providers for 64 of the proposed projects in 127 counties across Texas in fiscal year 2018. Prior to contract execution, an awarded grantee withdrew from the program, reducing the total number to 55 providers and 63 projects. However, the number of counties with a project in fiscal year 2019 remained unchanged at 127.

Service delivery for the Community Mental Health Grant Program commenced in the beginning of fiscal year 2019. Community Mental Health Grant projects served over 9,100 individuals monthly, covering 127 counties and nearly all metropolitan areas with over 100,000 population during fiscal year 2019. Grantees provided or coordinated services for over 82,000 unduplicated individuals. Client satisfaction surveys, conducted by HHSC, demonstrate high levels of individual satisfaction for both adult and youth project participants. Grantees utilize individualized measure methodology, therefore, similar measures across agencies cannot be compared. However, HHSC identified positive results in the outcome areas measured by grantees.

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<sup>1</sup> 2018-19 General Appropriations Act, S.B. 1, 85th Legislature, Regular Session, 2017 (Article II, HHSC, Rider 83).

# 1. Introduction

Section 531.0991 establishes a matching grant program to support community mental health programs providing services and treatment to individuals experiencing mental illness. Through implementation of the Community Mental Health Grant Program, HHSC supports comprehensive, data-driven mental health systems that promote both wellness and recovery by funding partnerships and community-based efforts that:

- Provide mental health treatment, prevention, early intervention, and/or recovery services
- Assist persons with transitioning between, or remaining in mental health treatment, services, and supports
- Provide quality and person-centered care for individuals with mental illness
- Encourage stakeholder partnerships and community collaboration
- Support strategic policy coordination

Per Section 531.0991(k), HHSC must submit a report by December 1 of each calendar year that evaluates the success of the matching grant program to the Governor, Lieutenant Governor, and the Legislature.

The report describes the design and overall characteristics of the Community Mental Health Grant projects awarded. The report also presents information related to the minimum set of measures developed to assess the impact of the program and focuses on the initial outcome data generated during fiscal year 2019.

## 2. Background

In 2017, the Legislature authorized HHSC to allocate up to \$30 million in general revenue to the Community Mental Health Grant Program during the 2018-19 biennium to increase access to treatment and other mental health services, especially outside of the most urbanized counties within the state. Provisions within the enabling legislation require HHSC to observe certain criteria in implementing the grant program. They are as follows:

- Award applicants must apply matching contributions. The match can be cash or in-kind and varies according to population of counties served. However, grantees cannot use other state or federal funds for the match.
- To the extent possible, HHSC must reserve 50 percent of allocated funds for awardees operating in counties with less than 250,000 inhabitants.
- Awarded funds and grantee matching funds are to be solely used for supporting programs that provide mental health care services and treatment to individuals with a mental illness and to coordinate mental health services and other transition support services for individuals with mental illness.
- HHSC must directly disburse allocated funds to grant recipients.
- Award applicants who are not LMHAs or LBHAs must submit letters of support from those entities as part of the application process.
- HHSC must develop selection criteria to evaluate and score applications, address whether an applicant proposes duplication of existing services, and consider the possibility of making multiple awards.

HHSC conducted competitive procurements for the Community Mental Health Grant Program during fiscal year 2018. The agency utilized two distinct solicitation methods:

- Needs and Capacity Assessment (NCA) performed for LMHAs and LBHAs
- Request for Application (RFA) performed for non-profit organizations and governmental entities

During the NCA process, HHSC initially made \$15 million of the appropriated \$30 million Community Mental Health Grant Program funds available. Of that amount, HHSC reserved 50 percent, or \$7.5 million, for counties with populations under 250,000 as required in legislation. HHSC made the remaining \$15 million available in the subsequent RFA process, setting aside 50 percent of the sum for counties with populations under a quarter million. Despite funding all eligible projects for these counties, total awards did not reach the full 50 percent. The dual procurements generated a total of 55 contracts, with HHSC awarding grants to 25 LMHAs and LBHAs and 30 non-profit organizations and local governmental entities. Several of the grants awarded were for multiple projects proposed by one organization. For the 2018-19 biennium, HHSC funded 63 projects, each with its own distinctive project design.

## 3. Program Eligibility

### Matching Requirement

Awards made by HHSC are contingent on an applicant's ability to provide matching funds. These may include cash or in-kind contributions from people or organizations but may not include money from state or federal sources. Depending on the population of the county where the Community Mental Health Grant Program project is located, the matching requirement is equal to 50 or 100 percent of the award amount. Applicants to the program must provide a match equal to:

- 100 percent of the state funds awarded if the project provides or coordinates services in a county with a population of 250,000 or greater;
- 50 percent of the state funds awarded if the project provides or coordinates services in a county with a population of less than 250,000; or
- 100 or 50 percent of the state funds awarded if the project provides or coordinates services in multiple counties, based on whether the county with the largest population is 250,000 or greater or less than 250,000, respectively.

### Geographic Preference

Treatment and other mental health services are not evenly distributed nor equally accessible across Texas. Mental health workforce shortages and lack of transportation act as barriers for people in rural and less densely populated areas trying to access care<sup>2</sup>. Awareness of the problem led legislators to craft a "set-aside" provision directing HHSC to reserve 50 percent of allocated program funds for counties with populations under 250,000.

### Required Strategies

Community Mental Health Grant Program projects support a range of clinical mental health and non-clinical supportive services for persons with unmet mental health needs. Although grantees have the flexibility in developing local projects, the projects must include one or more of the following preferred strategies:

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<sup>2</sup> Texas Statewide Behavioral Health Strategic Plan. (May 2016). Retrieved from <https://hhs.texas.gov/sites/default/files//050216-statewide-behavioral-health-strategic-plan.pdf>

- **Provide services to fill gaps in mental health prevention, early intervention, treatment and/or recovery.** Examples of services include:
  - ▶ Mental health education
  - ▶ Treatment modality gaps
  - ▶ Screening/assessment
  - ▶ Care coordination
  - ▶ Integrated services
  - ▶ Medication support
  - ▶ Family mental health
  - ▶ Services for targeted populations
  - ▶ Peer services
  
- **Assist persons that transition between or remain in mental health treatment services.** Types of assistance include:
  - ▶ Care coordination and navigation services
  - ▶ Transportation
  - ▶ Employment and education supports
  - ▶ Supportive housing
  
- **Encourage community partnerships and collaborations to assume responsibility for key activities.** Activities could include:
  - ▶ Identification of unmet needs
  - ▶ Development of community-based strategies
  - ▶ Implementation of activities outlined in community-based strategies

A limited number of projects apply optional strategies designed to complement preferred strategies. Examples of some of these optional strategies include but are not limited to enhancing the mental health workforce (e.g., training, educational stipends), increasing initial access to services, and performing needs assessments and evaluations.

## 4. Program Overview

### Project Design

The design of each Community Mental Health Grant Program project varies significantly across the program, and no two projects are alike. Many projects are designed to address coordination of mental health care and transition support services for individuals with mental illness. Other projects leverage existing resources to reduce duplication of effort and optimize existing strategies for effective clinical management of care. For example, West Texas Centers, in partnership with Howard County Sheriff's Department has operated a Mental Health Deputy Program since 2015 aimed at avoiding unnecessary or inappropriate incarcerations for individuals identified as having mental health issues.

HHSC staff categorized the awarded 63 projects into five main project types. In developing the categories, staff considered proposed service delivery components and community needs. The five project types are described below.

- **Access to Care:** These projects focus on access to outpatient mental health services and integrated healthcare services, mobile outreach, and transportation services.
- **Co-occurring Psychiatric and Substance Use Disorders:** These projects focus on meeting identified inpatient, outpatient, and crisis response needs of individuals with co-occurring mental health issues and substance use disorders.
- **Crisis and Forensic Services:** These projects represent collaborative efforts to develop and enhance coordinated care, mental health deputy response, and continuity of care related to jail release approaches across community crisis and first responder systems of care.
- **Peer Support Services:** These projects include recovery-focused clubhouses, peer support services, and educational training to develop peer providers within community service delivery structures.
- **School-Based and Early Intervention:** These projects focus on prevention and intervention, school-based response, and at-risk screening and identification of first episode psychosis in young adults.

# Geographic Distribution

Community Mental Health Grant Program grantees operate projects in 127 Texas counties. Of the 127 counties, 109 have populations under 250,000, while the remaining 18 contain at least 250,000 residents. Table 1 below provides a breakdown of the current projects by project type and number of counties served.

**TABLE 1. Community Mental Health Grant Program Projects by Project Types and Counties Served, for Fiscal Year 2019**

Project Type	Number of Projects	Counties Served
Access to Care	22	82
Crisis & Forensic Services	17	47
School-Based & Early Intervention	13	18
Co-occurring Psychiatric & Substance Use Disorders	7	13
Peer Support Services	4	14
<b>TOTAL</b>	63	174*

\*NOTE: Counties will duplicate across different project types.

Figure 1 on the following page illustrates the location of Community Mental Health Grant Program projects at the county level. Half of all Texas counties (127 of 254) are participating in the program.

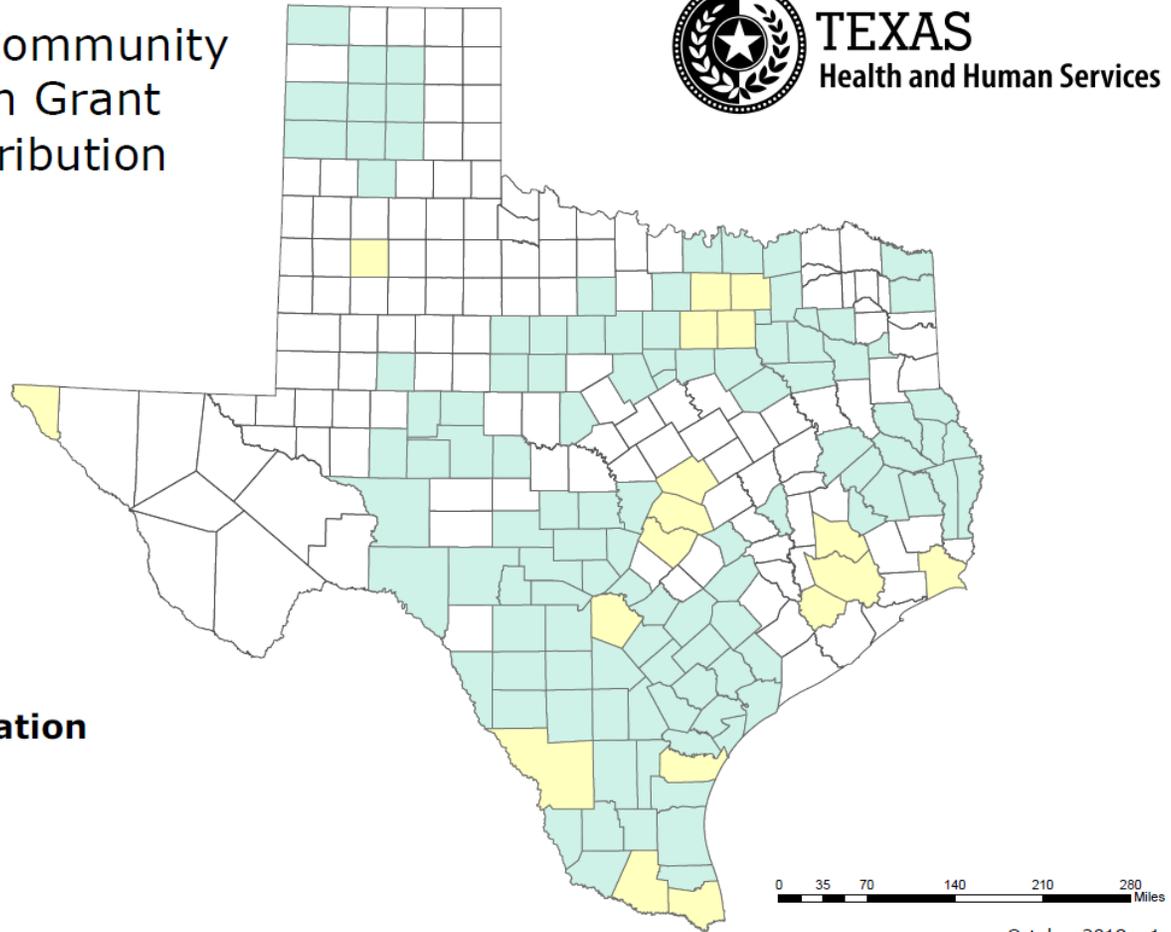
**Figure 1. Community Mental Health Grant Program County Distribution of Awards by Population, for Fiscal Years 2018 and 2019**

### House Bill 13: Community Mental Health Grant Program Distribution



#### Awards by Population

-  < 250,000
-  > 250,000



Source: Health and Human Services Commission, Behavioral Health Services

## Distribution of Funds by Project Type

Table 2 provides a breakdown of the number of projects and funding amount depending on county population size for each project type. The 34 projects in counties with 250,000+ population received \$20.5 million, or 68 percent of all program funds for the 2018-19 biennium. All eligible projects in counties with populations less than 250,000 were funded and received the remaining \$9.5 million in program funds, or 32 percent of all funding allocated for the Community Mental Health Grant Program.

**TABLE 2. Community Mental Health Grant Program Projects by Project Type, County Population, and Funding Amounts, for Fiscal Year 2019**

Project Type	No. of Projects in Counties <250,000	No. of Projects in Counties 250,000+	Funding in Counties <250,000	Funding in Counties 250,000+	Total Funding
<b>Access to Care</b>	14	8	\$4,557,466	\$2,967,566	\$7,525,032
<b>Crisis &amp; Forensic Services</b>	9	8	\$3,669,530	\$8,596,742	\$12,266,272
<b>School-Based &amp; Early Intervention</b>	2	11	\$300,310	\$6,676,668	\$6,976,978
<b>Psychiatric &amp; Substance Use Disorders</b>	4	3	\$1,017,807	\$1,761,248	\$2,779,055
<b>Peer Support Services*</b>	0	4	0	\$452,663	\$452,663
<b>TOTAL</b>	<b>29</b>	<b>34</b>	<b>\$9,545,113</b>	<b>\$20,454,887</b>	<b>\$30,000,000</b>

\*NOTE: HHSC did not receive applications for a Peer Support Services project in counties with less than 250,000 residents

## Project Type Examples

<b>Grantee Name (Project Type)</b>	<b>Project Description</b>	<b>Project Objectives</b>
<p><b>The Women’s Home</b> <b>(Access to Care)</b></p>	<p>Establishes a collaborative mix of stakeholders from the public and private sector who work collectively to impact the health and well-being of the Spring Branch East community in Houston. Offers holistic care for the entire family that includes behavioral health and primary healthcare. Other services include education and enrichment workforce development training, adult basic education, physical wellness, creative arts engagement, and other support services.</p>	<ul style="list-style-type: none"> <li>• Establish a community collaborative</li> <li>• Provide integrated healthcare to entire family</li> <li>• Offer education and employment development</li> </ul>
<p><b>Border Region Behavioral Health Center</b> <b>(Access to Care)</b></p>	<p>Integrates transportation unit into outpatient services to focus on meeting transportation challenges of rural individuals with mental illness and substance use disorders who also have a lack of resources or are unable to utilize public or private transportation.</p>	<ul style="list-style-type: none"> <li>• Provide transportation services to individuals with mental health and substance use conditions that live in isolated and geographically difficult areas to access</li> <li>• Reduce no-show rates to appointments</li> <li>• Reduce crisis episodes</li> <li>• Improve quality of care</li> </ul>

<b>Grantee Name (Project Type)</b>	<b>Project Description</b>	<b>Project Objectives</b>
<p><b>West Texas Centers</b></p> <p><b>(Crisis and Forensic Services)</b></p>	<p>Expands current Mental Health Deputy Program. West Texas Centers, in partnership with Howard County Sheriff's Department has operated a Mental Health Deputy Program since 2015 aimed at avoiding unnecessary or inappropriate incarcerations for individuals identified as having mental health issues. This program diverts individuals from jails and hospital emergency departments. The expanded program hired two additional staff: one case manager to be employed by West Texas Centers to office at the Howard County Jail and one Medical Clerk employed by the Howard County Jail.</p>	<ul style="list-style-type: none"> <li>• Expand Mental Health Deputy Program</li> <li>• Establish jail transition services</li> <li>• Create coordinated care process to ensure individuals receive mental health and substance use treatment services</li> </ul>
<p><b>Texoma Community Center</b></p> <p><b>(Co-occurring Psychiatric and Substance Use Disorders)</b></p>	<p>Adds a Licensed Chemical Dependency Counselor and Peer Specialist to existing Mobile Crisis Outreach Team. Ensures a 'warm hand off' to transitional services in an immediate and consistent manner. The Licensed Chemical Dependency Counselor will serve as a primary counselor and care coordinator for transitional services to assist individuals in accessing Outreach Screening Assessment and Referral services to prescribers for medication management and medication assisted treatment, linkage to peer support services and follow-up with outpatient and inpatient services.</p> <p>Provides outpatient mental health and substance use services to adolescents ages 13-17. In addition, Texoma hired a driver to assist with transportation barriers.</p>	<ul style="list-style-type: none"> <li>• Improve community-based crisis service</li> <li>• Divert from emergency room and criminal justice system</li> <li>• Enhance continuity of care</li> <li>• Ensure follow-up with referral sources.</li> <li>• Create referral source for adolescent substance use treatment</li> <li>• Increase family involvement in episode of care</li> <li>• Provide transport to access services across coordinated care plan</li> </ul>

<b>Grantee Name (Project Type)</b>	<b>Project Description</b>	<b>Project Objectives</b>
<p><b>West Texas A&amp;M University</b></p> <p><b>(School-Based and Early Intervention)</b></p>	<p>Student Counseling Services to acquire and integrate Therapist-Assisted Online, an informational and self-guided software designed to address common mental health needs. Using Therapist Assisted Online to allow Student Counseling Services to reach more students on and off campus. Access to timely treatment services is addressed by allowing quicker engagement in the program than waiting for an hourly spot to become available. As student needs for mental health services continue to increase, access to a new intervention tool such as Therapist Assisted Online diminishes wait times for students to begin engaging in treatment.</p>	<ul style="list-style-type: none"> <li>• Apply informational and self-guided software designed to address common mental health needs to reach more students both on and off campus</li> <li>• Enhance access and flexibility for engagement based on a student’s schedule and use of interactive technology</li> <li>• Increase existing workforce capacity engaging more individuals with brief video conference check-in sessions</li> </ul>
<p><b>Depelchin Children's Center</b></p> <p><b>(School-Based and Early Intervention)</b></p>	<p>Expands Family Integrated Relational Services Treatment program. The program helps meet that mission by focusing on children with high needs who have been removed from their biological families and are currently living with foster/adoptive families. The program integrates comprehensive, high quality mental health services into treatment plans for children at the highest risk of poor outcomes to improve the relational functioning of children and families. Finally, the program utilizes holistic assessments and individualized treatments to promote the well-being of the most vulnerable children in our community.</p>	<ul style="list-style-type: none"> <li>• Establish collaborative partnerships with several community organizations</li> <li>• Provide an integrated service model integrating the Trust Based Relational Interventions framework</li> <li>• Develop of trauma-informed care across community agencies</li> </ul>

## 5. Expected Outcomes

Section 531.0999 does not include specific outcomes for the Community Mental Health Grant Program, nor does it require HHSC to enforce standard outcomes in developing the grant program. The statute provides flexibility for community-based organizations and governmental entities to implement programs best suited for supporting local mental health needs. Grant program applicants developed project designs with identified service delivery gaps in mind. HHSC collaborated with grantees to establish project work plans that contain local objectives to help achieve overall project goals. HHSC anticipates the grant program will succeed by grantees concentrating on:

- Strengthening collaborations between service delivery providers in local service areas
- Increasing continuum of care for individuals with mental illness
- Providing greater continuity of care for individuals receiving services through a diverse local provider network, coordinated behavioral health approach within the criminal justice system
- Increasing access to early detection, screening, and assessment of individuals with behavioral health needs
- Aligning data tracking and reporting of data, and providing supervision and oversight, within the existing service delivery structure

## 6. Data Collection and Preliminary Findings

### Performance Measures

A standard set of performance measures typically locks multiple providers into delivering a standard of services to a standard target population, regardless of location. With H.B. 13, service providers have latitude in designing projects and developing service arrays to best address unique challenges in their communities.

HHSC developed a minimum set of measures to assess the impact of the program on the lives of individuals with mental illness. Two measures will assess:

- Effectiveness of the program in relation to the number of unduplicated persons served per month and year
- Overall effectiveness of the program, through agreed-upon measures, including:
  - ▶ Individual improvement based on assessments conducted before, during, and after provision of services
  - ▶ Percent of individuals with improved community connectedness
  - ▶ Individual satisfaction with the program based on satisfaction surveys conducted in a point in time

### Number of Unduplicated Individuals Served

Table 3 on the following page summarizes the 82,258 unduplicated individuals that grantees served by project type in fiscal year 2019. Highlights from the table are listed below.

- An overwhelming majority of individuals were served by projects in counties with 250,000 or more residents (88 percent).
- School-Based and Early Intervention projects served nearly half of all individuals in the program (46 percent).
- Only Co-occurring Psychiatric and Substance Abuse Disorder projects served a majority of individuals in counties under 250,000 population (53 percent).
- Peer Support Services projects served individuals exclusively from counties with 250,000 or greater population (100 percent).

**TABLE 3. Number of Unduplicated Individuals Served by Project Type and County Population, for Fiscal Year 2019**

<b>Project Type</b>	<b>Individuals Served in Counties &lt;250,000</b>	<b>Individuals Served in Counties 250,000+</b>	<b>Total Individuals Served</b>
<b>Access to Care</b>	4,906	23,055	27,961
<b>Crisis &amp; Forensic Services</b>	4,117	9,369	13,486
<b>School-Based &amp; Early Intervention</b>	369	37,346	37,715
<b>Co-occurring Psychiatric &amp; Substance Use Disorders</b>	342	309	651
<b>Peer Support Services</b>	0	2,445	2,445
<b>TOTAL</b>	<b>9,734</b>	<b>72,524</b>	<b>82,258</b>

Data presented in Table 4 below reveals that the average number of 9,123 individuals served per month exceeded the target of 7,400 established prior to program launch (123 percent of target). Other highlights include the following:

- School-Based and Early Intervention projects met 164 percent of their target.
- Peer Support Services project failed to reach at least 94 percent of its original target, but met 88 percent of its target.

**TABLE 4. Average Number of Individuals Served Per Month by Project Type, and as a Percent of the Monthly Target for each Project Type, for Fiscal Year 2019**

<b>Project Type</b>	<b>Average Number of Individuals Served per Month</b>	<b>Target for Average Number of Individuals Served per Month</b>	<b>Percent of Target Met</b>
<b>Access to Care</b>	2,251	2,389	94%
<b>Crisis &amp; Forensic Services</b>	1,520	1,547	98%
<b>School-Based &amp; Early Intervention</b>	4,960	3,029	164%
<b>Co-occurring Psychiatric &amp; Substance Use Disorders</b>	147	157	94%
<b>Peer Support Services</b>	245	278	88%
<b>TOTAL</b>	<b>9,123</b>	<b>7,400</b>	<b>123%</b>

## Individual Improvement

HHSC required, through procurement, that all grantees report on whether individuals registered some form of improvement due to project participation. The Outcome Report Card for the Community Mental Health Grant Program was compiled to show a snapshot of highlighted achievements reported by grantees during fiscal year 2019 (see Appendix A). While grantees currently utilize individualized measure methodology and outcome data cannot be aggregated, there were trends in terms of the outcome areas measured by grantees. More specifically, of the 47 grantees that reported on client service outcomes, the top three categories with positive results were:

- Increased recovery and wellness of individuals served;
- Successful prevention of adverse events such as jail, hospital, or emergency room use diversion; and,
- Improved autonomy for program participants.

HHSC staff are currently developing a common set (or “menu”) of performance measure options in which awarded grantees can choose to gauge the effectiveness of projects. Starting with fiscal year 2021, HHSC anticipates the addition of a menu of performance measure options to the Community Mental Health Grant Program to allow grant recipients the ability to:

- Ensure the same outcome areas are measured consistently
- Increase aggregate data and assess program outcomes for similar projects
- propose flexible projects that meet local needs

## Project Satisfaction

HHSC also measured the overall effectiveness of the Community Mental Health Grant Program through a client satisfaction survey. Community Mental Health Grant Program grantees collaborated with the agency in conducting an HHSC client satisfaction survey that was administered through a web-based platform in April 2019. English and Spanish language versions of two surveys were created to collect feedback for different populations and services. One survey was made available to adult participants (ages 18 and older) and the other was made accessible to parents/guardians of children and youth participants (ages 17 and younger). Both surveys acted as a snapshot in time, capturing satisfaction levels of respondents who started to receive services in April 2019 or earlier.

Each survey presented a respondent with a series of statements and they would use a five-point Likert scale (i.e., strongly agree, agree, neutral, disagree, strongly disagree) to indicate their level of agreement. Strongly agree and agree responses were defined as the “positive” responses. Every statement in each survey belonged to one of seven domains, with each domain containing between two and nine different statements crafted to capture respondent levels of satisfaction with an aspect of the project. For example, the domain concerning access to services on the adult version included the statement, “The location of services was convenient

for us.” For the youth survey, one of the statements in the domain involving functioning read as follows, “My child gets along better with family members.”

A respondent had to answer at least two-thirds of the items in each domain to have a valid response for that specific domain. Most respondents did not answer every item; the number of valid responses was lower for every domain than the total number of participants that completed the overall survey.

### Adult Satisfaction Survey Results

Tables 5 and 6 contain adult survey results. HHSC collected 582 total responses on the adult instrument and observed high levels of satisfaction across all domains. As noted in Table 5, the percent of respondents who responded positively to the seven domains ranged from a low of 83 percent to a high of 97 percent. In Table 6, adult survey responses are broken down by the five individual project types and the percentage of respondents that answered positively to each domain. More variation and lower scores are identifiable when results are presented at the project category level. Nevertheless, individual satisfaction remained high.

**TABLE 5. Community Mental Health Grant Program 2019 Adult Satisfaction Survey Results: Number and Percent Positive Responses\* (N=582)**

Survey Domain	Total Number of Valid Domain Responses	Total Number of Positive Domain Responses	Percent of Positive Domain Responses
Access to Services	533	505	95%
Quality and Appropriateness of Services	383	363	95%
Client Outcomes	463	386	83%
Participation in Treatment Planning	329	295	90%
General Satisfaction with Services	561	542	97%
Social Connectedness	549	474	86%
Functioning	472	393	83%

\*NOTE: In order for a survey response to be a “valid” response, a respondent must address two-thirds of the items in the domain. For example, of the 582 total adult surveys submitted, only in 533 surveys did the respondents actually address 2/3 of all the items in

the Access to Services domain. And of those 533, only 505 (or 95 percent) rated as positive responses.

**TABLE 6. Community Mental Health Grant Program 2019 Adult Satisfaction Survey Results: Percent Positive Responses by Project Type & Survey Domain (N=582)**

<b>Survey Domain</b>	<b>Access to Care (N=229)</b>	<b>Co-occurring Psychiatric and Substance Use Disorder (N=11)</b>	<b>Crisis and Forensic (N=66)</b>	<b>Peer Support Services (N=54)</b>	<b>School-Based and Early Intervention (N=222)</b>
<b>Access to Services</b>	95%	82%	98%	98%	93%
<b>Quality and Appropriateness of Services</b>	96%	82%	98%	98%	87%
<b>Client Outcomes</b>	77%	73%	85%	95%	87%
<b>Participation in Treatment Planning</b>	93%	73%	93%	81%	68%
<b>General Satisfaction with Services</b>	98%	91%	98%	98%	94%
<b>Social Connectedness</b>	79%	64%	86%	89%	95%
<b>Functioning</b>	76%	64%	84%	93%	90%

## Youth Satisfaction Survey Results

Youth survey data are presented on the following pages in Tables 7 and 8. HHSC captured more responses in this age group with 728 total surveys completed. While positive response rates were still relatively high for this instrument with a range of 76 to 91 percent across seven domains (see table 7), they were not as high as the range observed for the adult survey. Table 8 breaks down the results by four project types (peer support services only included participants ages 18 and older) showing areas that could use improvement including client outcomes for co-occurring psychiatric and substance use disorder. Youths from the School-Based

and Early Intervention projects dominated since they contributed over 90 percent of all responses. Lastly, as with adults, more variation in scores are noticeable when data is presented by project types.

**TABLE 7. Community Mental Health Grant Program 2019 Youth Satisfaction Survey Results: Number and Percent Positive Responses, by Survey Domain\* (N=728)**

<b>Survey Domain</b>	<b>Total Number of Valid Domain Responses</b>	<b>Total Number of Positive Domain Responses</b>	<b>Percent of Positive Domain Responses</b>
<b>Access to Services</b>	699	601	86%
<b>General Satisfaction with Services</b>	693	613	88%
<b>Client Outcomes</b>	700	570	81%
<b>Participation in Treatment Planning</b>	630	478	76%
<b>Staff Cultural Sensitivity</b>	694	635	91%
<b>Social Connectedness</b>	716	638	89%
<b>Functioning</b>	702	567	81%

\*NOTE: In order for a survey response to be a “valid” response, a respondent must address two-thirds of the items in the domain. For example, in the Access to Services survey domain, of the 728 total number of youth survey responses submitted, only 699 responses were considered valid. From the 699 responses, 601 of those responses (or 86 percent) were rated as positive responses.

**TABLE 8. Community Mental Health Grant Program 2019 Youth Satisfaction Survey Results: Percent Positive Responses by Project Type & Survey Domain (N=728)**

<b>Survey Domain</b>	<b>Access to Care (N=43)</b>	<b>Co-occurring Psychiatric and Substance Use Disorder (N=5)</b>	<b>Crisis and Forensic (N=11)</b>	<b>School-Based and Early Intervention (N=669)</b>
<b>Access to Services</b>	95%	100%	80%	85%
<b>General Satisfaction with Services</b>	93%	100%	91%	88%
<b>Client Outcomes</b>	68%	40%	60%	83%
<b>Participation in Treatment Planning</b>	91%	60%	91%	75%
<b>Staff Cultural Sensitivity</b>	98%	100%	100%	91%
<b>Social Connectedness</b>	93%	100%	100%	89%
<b>Functioning</b>	70%	60%	60%	82%

## 7. Conclusion

Section 531.0991 directs HHSC to implement the Community Mental Health Grant Program, allowing service provider organizations the flexibility to design projects tailored to meet local treatment and mental health service needs. Grant recipients include LMHAs and LBHAs, nonprofit organizations, local governments and institutions of higher education. HHSC implemented 63 projects aimed toward providing communities with resources to serve persons with mental illness.

Grantees have latitude in developing locally-based or regionally-based projects that work toward ensuring individuals with mental health issues can access services and treatment. Projects are encouraging continuity of care for individuals receiving services through partnerships and navigating participants within a continuum of care. They are engaging providers and involving multi-disciplinary teams in identifying individual and community needs. Projects are providing learning platforms for community stakeholders, students, clinicians and internal staff to develop or apply evidence-informed care protocols to serve persons with mental illness. They are increasing learning opportunities for staff, allowing them to follow participants, and communicate with a participant's care team throughout an episode.

During fiscal year 2019, grantees provided or coordinated services for over 82,000 unduplicated individuals. Community Mental Health Grant projects served over 9,100 individuals monthly, covering 127 counties and nearly all metropolitan areas with over 100,000 population. HHSC reported very high levels of individual satisfaction with projects for both adult and youth project participants. Although outcome data cannot be aggregated, HHSC identified positive results in outcome areas measured by grantees.

The Community Mental Health Grant Program received funding through the 2020-21 General Appropriations Act, H.B. 1, 86th Legislature, Regular Session, 2019 (Article II, HHSC, Rider 68). HHSC will conduct a second procurement in fiscal year 2020. The agency anticipates new contracts taking effect in fiscal year 2021. Recognizing that similar measures across agencies cannot be compared, HHSC is improving data collection and analysis by developing a common set of performance measure options. HHSC plans to incorporate the performance measurement options to highlight project effectiveness in the second procurement.

## **List of Acronyms**

<b>Acronym</b>	<b>Full Name</b>
H.B.	House Bill
HHSC	Health and Human Services Commission
LBHA	Local Behavioral Health Authority
LMHA	Local Mental Health Authority
NCA	Needs and Capacity Assessment
RFA	Request for Application

**Appendix A: Community Mental Health Grant Program Report Card for Fiscal Year 2019**

**Community Mental Health Grant Program FY 19 Program Report Card**

<b>GRANTEE</b>	<b>AREA</b>	<b>PROJECT(S)</b>	<b>OUTCOMES</b>	<b>OUTCOME AREAS</b>
<b>Amistad Community Health Center</b>	Nueces	Outpatient mental health	<p>*On average, approximately 20% of monthly individuals served with Major Depression demonstrated remission between June and August (PHQ-9).</p> <p>*On average, fewer than 1% of monthly participants had emergency room visits in the year.</p> <p>*Served an average of 137 individuals per month.</p>	<ul style="list-style-type: none"> <li>• Client Improvement</li> <li>• ER Diversion</li> <li>• Numbers Served</li> </ul>
<b>Andrews Center Behavioral Healthcare System</b>	Smith, Henderson, VanZandt, Wood, Raines	Crisis services through telepsychiatry	<p>*On average, 94% of monthly individuals served that were in crisis were not hospitalized in a state hospital system psychiatric bed within 30 days of intervention.</p> <p>*On average, 91% of monthly individuals served that were in crisis did not present to Emergency Department for psychiatric needs within 30 days of intervention.</p> <p>*Served an average of 26 individuals per month since January.</p>	<ul style="list-style-type: none"> <li>• ER Diversion</li> <li>• Hospital Diversion</li> <li>• Numbers Served</li> </ul>

GRANTEE	AREA	PROJECT(S)	OUTCOMES	OUTCOME AREAS
<b>Baptist Hospital of Southeast Texas</b>	Jefferson	Children's inpatient services with transition planning/outpatient services upon discharge.	<p>*On average, 77% of monthly participants showed improved life functioning in FY 19 (CANS).</p> <p>*Served an average of 10 people per month in inpatient, and 2 per month in outpatient transition services between November and August.</p>	<ul style="list-style-type: none"> <li>• Client Improvement</li> <li>• Numbers Served</li> </ul>
<b>Betty Hardwick Center</b>	Taylor, Jones, Callahan, Shackelford, Stephens	Continuity of care upon release from criminal justice system and adult outpatient MH service	<p>*On average, 91% of monthly clients enrolled showed improved scores on the ANSA Life Domain Functioning and Strengths domain.</p> <p>*On average, 84% of monthly individuals served showed progress towards recovery plan between October 2018 and August 2019.</p> <p>*Over 860 referrals were made to community providers in the year.</p>	<ul style="list-style-type: none"> <li>• Client Improvement</li> <li>• Continuity of Care</li> </ul>

GRANTEE	AREA	PROJECT(S)	OUTCOMES	OUTCOME AREAS
<p><b>Bluebonnet Trails Community Services</b></p>	<p>Williamson, Gonzales, Guadalupe, Lee, Fayette, Burnet</p>	<p>Crisis continuum of care including respite, residential, observation, stabilization, and inpatient hospitalization</p>	<p>*On average, 91% of monthly admissions to the Extended Observation Unit between October 2018 and August 2019 diverted individuals from the emergency room, state hospital, or jail.</p> <p>*An average of 83% of monthly admissions to the EOU reduced the length of stay in an emergency room, state hospital, or jail.</p> <p>*As of August, 97% of monthly participants served had not returned to the EOU within the fiscal year.</p> <p>*Served an average of 18 people per month in the EOU.</p> <p>*100% of admissions to the Residential &amp; Ambulatory Detoxification between February 2019 and August 2019 were as a result of diversion from an Emergency Room or State-funded detoxification program.</p>	<ul style="list-style-type: none"> <li>• ER Diversion</li> <li>• Hospital Diversion</li> <li>• Jail Diversion</li> </ul>

GRANTEE	AREA	PROJECT(S)	OUTCOMES	OUTCOME AREAS
<b>Border Region Behavioral Health Center</b>	Zapata, Jim Hogg, Starr	Expand traveling healthcare team and provide transportation to increase access.	<p>*Close to 840 referrals were provided during FY 19.</p> <p>*Provided close to 1,800 transports during FY 19.</p> <p>*Conducted over 960 mental and physical assessments to low income participants.</p> <p>*On average, nearly 40% of monthly participants showed improved CANS and ANSA scores during the reporting period.</p>	<ul style="list-style-type: none"> <li>• Client Improvement</li> <li>• Continuity of Care</li> <li>• Screenings/ Assessments</li> </ul>
<b>Boys and Girls Club of Pharr</b>	Hidalgo, Cameron	Prevention and early intervention for school-aged children	<p>*Over 4,100 individuals attended presentations during FY 19.</p> <p>*80 individuals received information and referral during FY 19.</p> <p>*On average, 86% of monthly participants reported increased knowledge.</p>	<ul style="list-style-type: none"> <li>• Client Improvement</li> <li>• Numbers Served</li> <li>• Number Trained</li> </ul>

GRANTEE	AREA	PROJECT(S)	OUTCOMES	OUTCOME AREAS
<b>Burke Center</b>	Angelina, Houston, Jasper, Nacogdoches, Newton, Polk, Sabine, San Augustine, San Jacinto, Shelby, Trinity, Tyler	Care coordination home health model and transportation services	<p>*On average, 92% of monthly participants received a Body Mass Index (BMI) screening and received follow-up plan if out of range.</p> <p>*On average, 82% of monthly participants received tobacco use screening at least once and were offered tobacco cessation information if a tobacco user.</p> <p>*On average, 48% of monthly participants were screened for unhealthy alcohol use and referred for service if needed.</p>	<ul style="list-style-type: none"> <li>• Continuity of Care</li> <li>• Screenings/ Assessments</li> </ul>

GRANTEE	AREA	PROJECT(S)	OUTCOMES	OUTCOME AREAS
<b>Camino Real Community Services</b>	Atascosa, Dimmit, Frio, Karnes, LaSalle, Maverick, McMullen, Wilson, Zavala	Mental health services to individuals with IDD and integrated healthcare	<p>*Served 195 unduplicated individuals in FY 19 through integrated healthcare.</p> <p>*On average, 54% of monthly individuals who were seeking mental health assistance through integrated healthcare program received counseling services.</p> <p>*Conducted nearly 30 community engagement activities in FY 19.</p> <p>*Served an average of 19 individuals per month in Mental Health Outpatient program for individuals with IDD.</p>	<ul style="list-style-type: none"> <li>• Community Engagement</li> <li>• Numbers Served</li> </ul>
<b>Center for Health Care Services</b>	Bexar	Outpatient services for individuals discharging from inpatient care	<p>*On average, 91% of monthly individuals served experienced a reduction in re-hospitalization or recidivism during the reporting period.</p> <p>*Provided close to 3,100 service encounters.</p> <p>*On average, provided 90 individuals per month with transition services from acute care post discharge to recovery services.</p>	<ul style="list-style-type: none"> <li>• Continuity of Care</li> <li>• Recidivism</li> <li>• Service Encounters</li> </ul>

GRANTEE	AREA	PROJECT(S)	OUTCOMES	OUTCOME AREAS
<b>Center for Life Resources</b>	Brown	Mental Health Deputy Program	<p>*Provided over 540 service encounters during FY 19.</p> <p>*On average, served 35 individuals per month.</p> <p>*Embedded two Brown County Sheriff Department mental health deputies in Mobile Crisis Outreach Team.</p>	<ul style="list-style-type: none"> <li>• Numbers Served</li> <li>• Service Encounters</li> </ul>
<b>Children's Medical Center Dallas</b>	Dallas	Evidence-based suicide prevention treatment	*Served an average of 74 individuals per month between January and August 2019.	<ul style="list-style-type: none"> <li>• Numbers Served</li> </ul>
<b>Collin County, Texas</b>	Collin	Continuity of care for jail release	<p>*On average, about 24% of monthly individuals served between January and July completed at least two goals of their release plan within 30 days of being released.</p> <p>*An average of 25 individuals were served per month between January and July.</p>	<ul style="list-style-type: none"> <li>• Client Improvement</li> <li>• Numbers Served</li> </ul>

GRANTEE	AREA	PROJECT(S)	OUTCOMES	OUTCOME AREAS
<b>Communities in School – Houston</b>	Harris	School-based mental health	<p>*98% of students who received intervention showed improvement as of August 2019.</p> <p>*An average of 92% of monthly individuals reporting a crisis received intervention.</p> <p>*An average of 1,180 individuals were served per month.</p>	<ul style="list-style-type: none"> <li>• Client Improvement</li> <li>• Numbers Served</li> </ul>
<b>Communities In Schools – North Texas</b>	Denton	Expand Communities in School model	<p>*97% of students served were promoted to the next grade.</p> <p>*98% of individuals and/or family members expressed satisfaction with service access and ability to address needs.</p> <p>*82% of students showed improved mental and/or behavioral health in FY 19.</p> <p>*94% of participants showed improved school performance during FY 19.</p>	<ul style="list-style-type: none"> <li>• Client Improvement</li> </ul>
<b>CommUnity Care</b>	Travis	Evidence-based behavioral health assessments and therapy	<p>*On average, served 186 individuals per month.</p>	<ul style="list-style-type: none"> <li>• Numbers Served</li> </ul>

GRANTEE	AREA	PROJECT(S)	OUTCOMES	OUTCOME AREAS
<b>Community Healthcore</b>	Bowie, Cass	Critical Time Intervention Team	<p>*An average of 93% of monthly individuals served showed a decrease in interactions with First Responders.</p> <p>*Served an average of 12 individuals per month.</p> <p>*Provided over 200 face-to-face service encounters.</p>	<ul style="list-style-type: none"> <li>• Numbers Served</li> <li>• Prevent First Responder</li> <li>• Service Encounters</li> </ul>
<b>Community Hope Projects, Inc.</b>	Hidalgo, Cameron, Willacy	Peer service for overall health and wellness	<p>*On average, 40% of monthly individuals served showed improved quality of life.</p> <p>*Served an average of 120 individuals per month.</p>	<ul style="list-style-type: none"> <li>• Client Improvement</li> <li>• Numbers Served</li> </ul>
<b>Covenant Health System Foundation</b>	Lubbock	Inpatient and Outpatient SUD services	*Data not current available due to compliance/technical assistance processes underway.	NA
<b>Dallas-Fort Worth Hospital Council Foundation</b>	Ellis, Erath, Grayson, Hood, Hunt, Johnson, Kaufman, Navarro, Parker, Rockwall, Somervell, Wise	Mental Health First Aid Training	*Trained 500 medical professionals with approximately 100% completion.	<ul style="list-style-type: none"> <li>• Number Trained</li> </ul>

GRANTEE	AREA	PROJECT(S)	OUTCOMES	OUTCOME AREAS
<p><b>Depelchin Children Center</b></p>	<p>Harris, Travis</p>	<p>FIRST program expansion providing mental health treatment to children and school based mental health</p>	<p>*100% of youth served through FIRST showed a reduction in problem behaviors.</p> <p>*On average, 60% of monthly individuals served through FIRST (Tier II) showed improvement on the Child and Adolescent Needs and Strengths (CANS).</p> <p>*On average, close to 700 youth were served per month in the FIRST program and 180 through the school based mental health.</p> <p>*93% of adults receiving Caregiver training in Quarter 4 reported an improved ability to respond to trauma.</p> <p>*71% of youth in the last quarter receiving the group curriculum had improved resiliency.</p>	<ul style="list-style-type: none"> <li>• Client Improvement</li> <li>• Numbers Served</li> </ul>

GRANTEE	AREA	PROJECT(S)	OUTCOMES	OUTCOME AREAS
<b>Ecumenical Center</b>	Bee, Bexar, Aransas, Atascosa, Bandera, Blanco, Brooks, Cameron, Comal, Duval, Edwards, Frio, Gillespie, Hidalgo, Jim Hogg, Jim Wells, Karnes, Kendall, Kenedy, Kerr, Kleberg, Kimble, Live Oak, Llano, Mason, Medina, Nueces, Real, San, Patricio, Starr, Uvalde, Val Verde, Wilson, Willacy, Webb, Zapata	Integrated Behavioral Health model, telecounseling, outpatient mental health*On average, served 430 individuals per month through outpatient mental health services.  *In March 2019, close to 70% of monthly individuals served showed improved CANS/ANSA scores.	*On average, served 430 individuals per month through outpatient mental health services.  *In March 2019, close to 70% of monthly individuals served showed improved CANS/ANSA scores.	<ul style="list-style-type: none"> <li>• Client Improvement</li> <li>• Numbers Served</li> </ul>

GRANTEE	AREA	PROJECT(S)	OUTCOMES	OUTCOME AREAS
<p><b>Family Support Services of Amarillo</b></p>	<p>Potter, Randall</p>	<p>Comprehensive behavioral health for veterans and families.</p>	<p>*As of August, 100% of participants who were served and seeking housing found housing within one year.</p> <p>*An average of 40% of monthly participants diagnosed with PTSD showed improvement in functional health and well-being between June and August.</p> <p>*As of August, 50% of monthly clients served between April and August who were unemployed and seeking employment, found employment within one year.</p>	<ul style="list-style-type: none"> <li>• Client Improvement</li> <li>• Housing</li> <li>• Numbers Served</li> </ul>
<p><b>Foundation Communities</b></p>	<p>Travis</p>	<p>Permanent supportive housing stability team</p>	<p>*On average, 300 case management encounters for supportive housing were provided per month.</p> <p>*In August, 100% of monthly participants served showed improve Strengths scores at reassessment.</p> <p>*100% of participants were stably housed for 12 months or duration of grant period.</p> <p>*An average of 41 individuals were served per month.</p>	<ul style="list-style-type: none"> <li>• Client Improvement</li> <li>• Housing</li> <li>• Numbers Served</li> </ul>

<b>GRANTEE</b>	<b>AREA</b>	<b>PROJECT(S)</b>	<b>OUTCOMES</b>	<b>OUTCOME AREAS</b>
<b>Gregg County, Texas</b>	Gregg County	Continuity of care for jail release	*Served an average of 18 individuals per month.	<ul style="list-style-type: none"> <li>• Numbers Served</li> </ul>
<b>Gulf Bend Center</b>	Goliad, Refugio, Jackson, Calhoun, Lavaca, Dewitt, Victoria	Community Response Team including case managers, MH law enforcement and judicial	<p>*An average of 74% of monthly individuals served did not present to ED for psychiatric needs within 30 days of CRT services.</p> <p>*An average of 90% of monthly individuals served did not get admitted to an inpatient level of care within 30 days of CRT services.</p> <p>*On average, 56% of monthly individuals served by the Community Response Team were linked to treatment.</p>	<ul style="list-style-type: none"> <li>• Continuity of Care</li> <li>• ER Diversion</li> <li>• Hospital Diversion</li> </ul>
<b>Harris Center</b>	Harris	Crisis call diversion program	<p>*Prevented 2,450 First Responder deployments during FY 19.</p> <p>*On average, served 380 individuals per month.</p>	<ul style="list-style-type: none"> <li>• Prevent First Responder</li> <li>• Numbers Served</li> </ul>
<b>Harris County, Texas</b>	Harris	Pre-jail diversion-Harris County Assessment and Respite Triage	<p>*An average of 147 individuals voluntarily admitted to Diversion Center monthly for treatment.</p> <p>*On average, 145 individuals were assessed per month.</p>	<ul style="list-style-type: none"> <li>• Screenings/ Assessments</li> </ul>

GRANTEE	AREA	PROJECT(S)	OUTCOMES	OUTCOME AREAS
<b>Helen Farabee Regional MHMR Center</b>	Young	Outpatient SUC services for adults	*An average of 5 individuals per month received case management services.	<ul style="list-style-type: none"> <li>• Numbers Served</li> </ul>
<b>Hill Country Center</b>	Comal	Outpatient mental health, peer services, and school outreach	<p>*On average, 91% of monthly individuals served had documentation of a Body Mass Index with follow up.</p> <p>*Served an average of 194 individuals per month.</p>	<ul style="list-style-type: none"> <li>• Continuity of Care</li> <li>• Numbers Served</li> </ul>
<b>Hope Fort Bend Clubhouse</b>	Fort Bend	Expand clubhouse services	<p>*On average, served 12 individuals per month.</p> <p>*An average of 53% of monthly individuals served received an agricultural program encounter.</p>	<ul style="list-style-type: none"> <li>• Numbers Served</li> </ul>
<b>Integral Care</b>	Travis	School-based mental health	<p>*Responded to over 5,100 hotline calls during FY 19.</p> <p>*On average, 98% of monthly individuals served showed improvement in school behavior, school attendance or school domains on CANS after 90 days of service.</p>	<ul style="list-style-type: none"> <li>• Client Improvement</li> <li>• Service Encounters</li> </ul>

GRANTEE	AREA	PROJECT(S)	OUTCOMES	OUTCOME AREAS
<b>Joven</b>	Bexar	School-based mental health	<p>*At the end of the service period, 60% of individuals receiving services had improved CANS Family Functioning domain.</p> <p>*90% of program participants reported satisfaction with services and that their needs were understood.</p>	<ul style="list-style-type: none"> <li>• Client Improvement</li> </ul>
<b>LifePath Systems</b>	Collin	SUD treatment for adults including outpatient, detox, and Intensive Residential	<p>*On average, 87% of monthly individuals served between January and August demonstrated improvement in either Behavioral Health Needs, Life Domain Functioning, Risk, or Trauma during their first six months.</p> <p>*An average of 39% of monthly individuals referred to SUD outpatient services completed the service between June and August 2019.</p>	<ul style="list-style-type: none"> <li>• Client Improvement</li> <li>• Retention</li> </ul>
<b>MHMR Brazos Valley</b>	Brazos	Healthcare Navigator	<p>*Made 189 referrals to Primary Care Physicians during FY 19.</p> <p>*On average, served 23 individuals per month.</p>	<ul style="list-style-type: none"> <li>• Continuity of Care</li> <li>• Numbers Served</li> </ul>

GRANTEE	AREA	PROJECT(S)	OUTCOMES	OUTCOME AREAS
<b>MHMR Services for the Concho Valley</b>	Tom Green, Crockett, Coke, Irion, Concho, Sterling, Regan	Mental Health Deputy Program and School seminars	<p>*10 additional deputies provided services outside of Tom Green County in FY 2019.</p> <p>*By August, all 7 counties had mental health deputies providing services.</p> <p>*10 deputies were trained in the Texas Commission on Law Enforcement Mental Health Certification course.</p> <p>*On average, served 74 individuals per month.</p>	<ul style="list-style-type: none"> <li>• Numbers Served</li> <li>• Number Trained</li> </ul>
<b>My Health My Resource Tarrant County</b>	Tarrant	Community-based collaborative, transition planning, START program for individuals with IDD/autism	<p>*Conducted 10 community outreach events during FY 19.</p> <p>*On average, 96% of monthly participants had a completed Provisional Crisis Plan.</p>	<ul style="list-style-type: none"> <li>• Community Engagement</li> </ul>
<b>National Alliance on Mental Illness</b>	Taylor, Jones, Nueces, Smith, Bexar, El Paso, Denton, Tarrant, Bell, Travis	Peer support and NAMI Connection Recovery	<p>*Trained 580 individuals in their Peer Support and Connection Recovery program.</p> <p>*On average, 85% of affiliates used data to improve and adjust Connection Recovery Support classes monthly.</p>	<ul style="list-style-type: none"> <li>• Number Trained</li> </ul>

<b>GRANTEE</b>	<b>AREA</b>	<b>PROJECT(S)</b>	<b>OUTCOMES</b>	<b>OUTCOME AREAS</b>
<b>NEWCO</b>	Cooke, Grayson, Fannin	Mental Health Deputy Program	*Data not currently available due to compliance/technical assistance processes underway.	NA
<b>North Texas Behavioral Health Authority</b>	Dallas, Hunt, Rockwall, Kaufman, Ellis, Navarro	Psychiatric living room	*On average, 86% of monthly individuals served between May and August with a hospitalization or crisis during the previous 12 months, did not present to an emergency department or psychiatric facilities during the reporting period.  *Served an average of 10 people per month between May and August.	<ul style="list-style-type: none"> <li>• ER Diversion</li> <li>• Hospital Diversion</li> <li>• Numbers Served</li> </ul>
<b>Pecan Valley Centers</b>	Johnson, Parker, Hood, Erath, Palo Pinto, Somervell	COPSD Inpatient Beds	*On average, 56% of monthly individuals discharged from Inpatient Substance Use Treatment received evidence-based practices as indicated by needs.	<ul style="list-style-type: none"> <li>• Continuity of Care</li> </ul>

GRANTEE	AREA	PROJECT(S)	OUTCOMES	OUTCOME AREAS
<b>Project Vida Health Center</b>	El Paso	School-based mental health	<p>*45% of individuals assessed in May showed increased academic performance.</p> <p>*Nearly 60% of individuals showed an increase in overall well-being.</p> <p>*Served an average of 32 individuals per month.</p>	<ul style="list-style-type: none"> <li>• Client Improvement</li> <li>• Numbers Served</li> </ul>
<b>SaMMinistries</b>	Bexar	Permanent supportive housing	<p>*50% of monthly individuals served in August showed increased housing stability.</p> <p>*45% of monthly individuals served in August showed improved behavioral health.</p>	<ul style="list-style-type: none"> <li>• Client Improvement</li> <li>• Housing</li> </ul>
<b>San Antonio Clubhouse</b>	Bexar	Peer services	<p>*Served an average of 89 individuals per month for FY 19.</p> <p>*Clubhouse members participated in a Clubhouse Work Ordered day an average of 69 times throughout FY 19.</p> <p>*On average, 40% of monthly individuals served successfully integrated into the Clubhouse Work Ordered Day.</p>	<ul style="list-style-type: none"> <li>• Employment</li> <li>• Numbers Served</li> </ul>

GRANTEE	AREA	PROJECT(S)	OUTCOMES	OUTCOME AREAS
<b>StarCare Specialty Health System</b>	Lubbock	Outpatient psychiatric care	<p>*Program participants were involved in over 550 service encounters.</p> <p>*On average, provided 44 individuals in professional residency programs with practicum opportunities per month.</p>	<ul style="list-style-type: none"> <li>• Numbers Served</li> <li>• Service Encounters</li> </ul>
<b>Texas Panhandle</b>	Potter, Randall	Community collaborative, population health, community response teams	<p>*On average 93% of monthly individuals served had no further crisis calls within 60 days of the first Community Response Team (CRT) service.</p> <p>*More than 210 unduplicated individuals received CRT services during FY 19.</p> <p>*Over 710 individuals received a depression screening (PHQ-9) during FY 19.</p>	<ul style="list-style-type: none"> <li>• Numbers Served</li> <li>• Service Encounters</li> <li>• Screenings/ Assessments</li> </ul>
<b>Texas Tech University Health Science Center</b>	Moore, Hutchinson, Oldham, Potter, Carson, Deaf Smith, Randall, Armstrong, Swisher	Teleservice to provide mental health care for at-risk youth	*Data not currently available due to compliance/technical assistance processes underway.	NA

GRANTEE	AREA	PROJECT(S)	OUTCOMES	OUTCOME AREAS
<b>Texoma Center</b>	Cooke, Fannin, Grayson	COPSD mobile crisis team, MD/IDD mobile crisis team, continuity of care for jail release, and outpatient SUD for adolescents	<p>*An average of 63% of monthly individuals who received crisis follow up by an LCDC between March and August showed improved ANSA scores 90 days post crisis episode.</p> <p>*On average, 88% of monthly individuals served through the Adolescent Outpatient Program showed progress towards their treatment objectives.</p> <p>*Provided nearly 400 service encounters in the Veterans Outpatient Program.</p> <p>*Provided over 850 crisis service encounters for individuals with IDD.</p>	<ul style="list-style-type: none"> <li>• Client Improvement</li> <li>• Service Encounters</li> </ul>
<b>The Women's Home</b>	Harris	Create center for holistic healthcare, wellness, education and enrichment services	<p>*Served an average of 62 individuals per month.</p> <p>*In August, 71% of participants who completed an intake, participated in a prevention or early intervention activity.</p>	<ul style="list-style-type: none"> <li>• Numbers Served</li> </ul>

<b>GRANTEE</b>	<b>AREA</b>	<b>PROJECT(S)</b>	<b>OUTCOMES</b>	<b>OUTCOME AREAS</b>
<b>Tri-County Services</b>	Montgomery	Outpatient SUD services for adolescents	<p>*An average of 61% of monthly individuals served between November and August received 3 engagement services and experienced a change in their Stage of Change or began SUD treatment.</p> <p>*On average, served 44 individuals per month.</p>	<ul style="list-style-type: none"> <li>• Client Improvement</li> <li>• Numbers Served</li> </ul>
<b>United Way Amarillo Canyon</b>	Randall, Potter, Dallam	Behavioral health community collaborative	<p>*On average, 13 providers were engaged per month.</p> <p>*On average, engaged with 8 unduplicated stakeholder groups each month.</p>	<ul style="list-style-type: none"> <li>• Community Engagement</li> </ul>
<b>United Way Denton County</b>	Denton	Continuity of care for jail release	<p>*On average, 80% of monthly individuals served were not booked into jail after entering the program.</p> <p>*On average, 143 individuals were served per month.</p>	<ul style="list-style-type: none"> <li>• Jail Diversion</li> <li>• Numbers Served</li> </ul>
<b>UT Southwestern Medical Center</b>	Dallas	Prevention and early intervention/behavioral health college students	<p>*Supported over 20,450 screenings during FY 19.</p>	<ul style="list-style-type: none"> <li>• Numbers Served</li> <li>• Screenings/ Assessments</li> </ul>

GRANTEE	AREA	PROJECT(S)	OUTCOMES	OUTCOME AREAS
<b>West Texas A&amp;M University</b>	Randall	Therapist-assisted online intervention for college students	*On average, over 100 individuals participated either online or in person per month.	• Numbers Served
<b>West Texas Centers</b>	Howard	Mental Health Deputy Program	*274 jail screenings completed at booking indicated mental health needs.  *Identified over 230 individuals through transition planning who potentially need mental health or substance use services.	•Screenings/ Assessments

**NOTES:** Data presented represent a snapshot of grantee reported data. Unless otherwise specified, data collection and analysis was conducted on a monthly cycle. Data provided has not been audited by HHSC and represents what was self-reported by grantees each month. Outlier data was not included in monthly averages if it was during ramp-up or a result of data not being submitted for the month. Outcomes that include an average represent the average for each monthly outcome reported. Grantees currently utilize their own methodology so similar measures across agencies cannot be compared.