

## Dallas County Behavioral Health Leadership Team Initial Charter Document Recommendations

### Purpose of Behavioral Health Leadership Team (BHLT)

The Dallas County Behavioral Health Leadership Team (BHLT) is empowered by the Dallas County Commissioners Court and Parkland's Board of Managers specifically to function as a single point of accountability, planning, oversight, and funding coordination for all Dallas County behavioral health services and funding streams. Behavioral health, for purposes of this document and the sphere of responsibility of the BHLT, is defined as mental health and chemical dependency.

The goal of the BHLT is to permit Dallas County to:

- leverage all of its resources (both NorthSTAR – which is less than 60% of the total – and non NorthSTAR county resources) more effectively;
- provide more empowered and coordinated representation and oversight into the functioning of the NorthSTAR system itself; and,
- create a single point of accountability and interface for Dallas County behavioral health services with the Commissioners Court, the Dallas County Hospital District (Parkland), the North Texas Behavioral Health Authority (NTBHA), and other stakeholder groups including, but not limited to: the Criminal Justice Advisory Board (CJAB), the Metro Dallas Homeless Alliance (MDHA), other County Departments, state agencies (DSHS, HHSC, TDCJ), the local legislative delegation, foundations, and consumer and family advocates;
- begin the process of forming a true authority for all Dallas County behavioral health services that ensures local control of the funding for and delivery of services, and
- ***ensure that Dallas County is a partner with other counties in developing a strong regional behavioral health care system.***

### Historical Framework for the BHLT

Funding for behavioral health care in Dallas County is highly fragmented. NorthSTAR, which provides 50 to 60% of public behavioral health care, is essentially uncoordinated with other funding streams (***Non-waiver Medicaid, Medicare***, CHIP, Veteran's Administration, juvenile justice funding, community corrections and child welfare.)

The NorthSTAR system is unique in that funding for persons with no insurance coverage is capped, yet the expectation of service access and service provision is unlimited.

While NorthSTAR has been effective in improving the efficiency of service delivery, there must be an increased emphasis on the differential needs of consumers at various points within the system. For example, pregnant women with substance abuse treatment needs and criminal justice system involvement will need a more intense level of service than other consumers. Similarly, persons entering permanent supportive housing and returning to the community after incarceration requires additional support.

The NorthSTAR system has been using essentially the same performance measures for the past ten years. These measures have not proven effective in determining how the system is meeting the needs of its consumers. Additionally, reviewing performance of

the behavioral health system in Dallas County must include data from all service delivery systems.

The impoverished populations in Dallas County are growing more rapidly than the population as a whole. This has contributed to a significant increase in persons eligible for and accessing NorthSTAR services. The proportion of NorthSTAR members served in acute settings has grown by 9.4% from December 2009 through May 2010. The increase has been particularly driven by persons not currently in care.

Significant numbers of persons receive their public behavioral health services in the Dallas County jail (28.2% of adults) or through the Dallas County Juvenile Department (40% of youth). The rate of growth in the number of persons in jail waiting for behavioral health services has grown four times more than the regular jail population. Similarly, the community corrections system is experiencing increasing difficulty in providing access to treatment through its service array in a timely manner.

Dallas County's juvenile justice system is largely dependent upon county funding. Reductions in county funding have resulted in larger proportional cuts in service funding for juveniles than the overall behavioral health system.

Important steps forward have been taken for persons who are homeless, but significant work remains to be done.

System redesign efforts must take into account the known and yet-to-be known changes related to health care reform and mental health parity. For example, health care reform is expected to require improved coordination of primary health care and behavioral health care.

There is much strength within the Dallas County behavioral health system. These strengths must be the starting point for creating a single point of accountability and interface for Dallas County behavioral health services

### **Guiding Principals of the BHLT**

- The BHLT supports the vision of the Dallas County Commissioners Court and Parkland Board of Managers to develop a system of behavioral health care for Dallas County consistent with the following principals:
  - An organized authority leads all behavioral health services, regardless of funding source
  - Service effectiveness, not only access, is contractually mandated and incentivized for all providers
  - Behavioral and physical health care are integrated
  - Data is shared among all providers in a manner that improves service effectiveness
  - A single portal provides access to all crisis services
  - The special needs of mentally ill offenders are met
  - Adequate resources are allocated to housing
  - Chemical dependency services demonstrably reduce criminal justice system involvement and substance use
  - Children's services are family-centered and systems-oriented

- The BHLT will review the TriWest/Zia Partners assessment of behavioral health delivery in Dallas County and use it as a “road map” for developing action plans.
- The BHLT will be a locus for quality improvement in behavioral health services in Dallas County. The BHLT will work with the clinical operations teams and other stakeholders to identify performance indicators that are connected to the stories and experiences of Dallas County residents who are struggling to make progress toward recovery, and be able to track how well the system is doing in reducing crisis, improving welcoming, integration, and continuity, using its resources effectively, and working in partnership to make change.
- The BHLT will be a locus for coordination of advocacy and program development for the county. This includes legislative advocacy, identifying major grant opportunities (e.g. application for a children’s system of care grant), and so on.
- ***The BHLT will ensure that Dallas County is an active partner with other counties in developing a strong regional behavioral healthcare system.***

#### **Deliverables from the BHLT**

- The BHLT will meet no less than monthly, on a regular schedule, beginning in September 2010. All meetings will be open to the public, and posted according to open meetings requirements as required by law. Formal minutes of each meeting will be distributed to participants and to the Dallas Commissioners Court and Parkland Board of Managers. The BHLT will provide status reports, as well as copies of plans and recommendations, to the Commissioners Court and to Parkland as they are developed.
- The BHLT must be formally representative of stakeholders in the Dallas County system with designated members representing various constituencies. By December 31, 2010, the BHLT will submit to the Commissioners and Parkland the recommended representation plan and membership list for 2011. Membership and representation may be adjusted from time to time as needs change, through a membership process that will be provided for in the approved by-laws.
- The BHLT shall be responsible for creating bylaws and identifying designated leadership that will be accountable for leading the meetings, ensuring that the group is productive and task focused, and for being the point of communication between the BHLT and Commissioners Court, Parkland, and other stakeholders. The leadership structure must ensure a balance between promoting broad stakeholder participation and the ability to make decisions without undue influences from any particular interests. The specific leadership structure and its identified members will be determined by the BHLT no later than December 31, 2010. Ron Stretcher and Josh Floren will serve as interim co-chairs until that time.
- The BHLT will be responsible for identifying subgroups, working committees, and other mechanisms for getting its work done. Initially, the BHLT will be responsible for creating a formal working connection with the following groups: an Adult Clinical Operations Team, a Child/Family Clinical Operations Team, the Metro-

Dallas Homeless Alliance, the Physician Leadership Group and the Mental Health Steering Committee for Criminal Justice. In addition, the BHLT will designate formal subgroups for working on the county treatment system for substance use disorders, addressing issues related to cultural and linguistic minorities, evaluating the impact of Health Care Reform on the Dallas County system, and other groups as determined to be needed for short term projects or ongoing work. The BHLT will report on the formation of these relationships and workgroups by January 31, 2011.

- ***By January 31, 2011, the BHLT will develop a formal process to ensure communication and coordination with other counties in the North Texas area. This process will be communicated to the Dallas County Commissioners Court along with recommendations for the Court to facilitate a partnership with other counties to develop a strong regional behavioral healthcare system.***
- By March 31, 2011, the BHLT will identify performance indicators and improvement targets for the behavioral health system that help the system to improve, and report those indicators and targets to the Commissioners.
- As part of its May 2011 report, the BHLT will indicate major areas of advocacy and fundraising that will be undertaken during 2011.
- The BHLT will be responsible for working in partnership to coordinate behavioral health resources for Dallas County residents. By May, 2011, the BHLT will produce – in partnership with other funding sources - a brief 2-3 page report summarizing all sources of funding for behavioral health services for Dallas County, and the types of services provided. A similar report will be produced annually.
- The BHLT will provide written input to the Commissioners and Parkland Hospital on recommended changes to the contracts among NTBHA, DSHS and the managed care organization (MCO) that will promote increased local control of behavioral health funding, improved performance monitoring, improved outcomes for consumers and increased access to services for priority populations including: homeless persons, persons in the criminal/juvenile justice system, and persons discharged from higher levels of care, including the state hospitals.
- The BHLT will recommend to the Dallas County Commissioners Court and Parkland the structure of a formal behavioral health authority for Dallas County. It is expected that the behavioral health authority will grow from the BHLT and may include revisions to the BHLT governance structure. This recommendation will be presented by December 31, 2011.